

**In the
Supreme Court of the United States**

THOMAS KEATHLEY,

Petitioner,

v.

BUDDY AYERS CONSTRUCTION, INC.,

Respondent.

ON WRIT OF CERTIORARI TO THE UNITED STATES
COURT OF APPEALS FOR THE FIFTH CIRCUIT

JOINT APPENDIX

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PETITION FOR CERTIORARI FILED JUNE 27, 2025
CERTIORARI GRANTED OCTOBER 20, 2025

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In accordance with Supreme Court Rule 26.1, the following items have been omitted in printing this joint appendix because they appear on the following pages of the appendix to the Petition for a Writ of Certiorari (filed June 27, 2025):

Opinion of the United States Court of Appeals for the Fifth Circuit, <i>Keathley v. Buddy Ayers Construction, Inc.</i> , No. 24-60025, 2025 WL 673434 (5th Cir. Mar. 3, 2025)	1a
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[ROA 941]

A

The Alders Law Firm

August 26, 2021

VIA Email: ekeith@fcci-group.com

FCCI Insurance Company

PO Box 58004

Sarasota, FL 34232

RE: Classification Car Accident
 Claim No: C00302514
 Our Client: Thomas Keathley
 Your Insured: Ayers Construction

Dear Eric:

Please be advised that our office represents the interests of the above individual concerning an automobile accident in Corinth, Mississippi. The accident occurred on August 23, 2021. According to our investigation, the recklessness of the underinsured driver caused this accident.

As a result of this accident, our client sustained personal injuries for which she is receiving treatment. Additionally, our client incurred property damage to her vehicle. You may contact the client regarding **PROPERTY DAMAGE** only. Permission is not given for any recorded statement or questioning of our client. Additionally, please send me a copy of my client's dec page.

A claim is hereby made for injuries and damages sustained by our client due to the negligence of the uninsured driver. Likewise, please respond to this

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letter in writing so that we may confirm that we are communicating with the proper authorized individual in this matter. Further, please refer all future correspondence to this office.

Best,

s/ Austin L. Alders

Austin Alders, Esq.

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[ROA 942-50]

**UNITED STATES BANKRUPTCY COURT
EASTERN DISTRICT OF ARKANSAS**

Debtor(s) Thomas Lee Keathley, Sr. Case No. 2:19-
Connie Irene Keathley bk-16848

Arkansas Chapter 13 Plan
(Local Form 13-1)

Original Plan ☐

Amended Plan ☒ **For an amended plan, all applicable provisions must be repeated from the previous plan(s). Provisions may not be incorporated by reference from previously filed plan(s).**

List below the sections of the plan that have been changed:

2.1

State the reason(s) for the amended plan, including any changes of circumstances below. If creditors are to be added, please complete Addendum A as well as file any appropriate amended schedules.

Increase to pay accrued arrearages. No change in base.

The Amended Plan is filed:

☐ Before confirmation

☒ After confirmation

Part 1: Notices

To Debtors: This form sets out options that may be appropriate in some cases, but the presence of an option on the form does not indicate that the option is appropriate in your circumstances. Plans that do not comply with local rules and judicial rulings may not be confirmable.

Original plans and amended plans must have matrix(ces) attached or a separate certificate of service should be filed to reflect service in compliance Fed. R. Bankr. P. 2002.

To Creditors: Your rights may be affected by this plan. Your claim may be reduced, modified, or eliminated. You should read this plan carefully and discuss it with your attorney if you have one in this bankruptcy case. If you do not have an attorney, you may wish to consult one. If you oppose the plan's treatment of your claim or any provision of this plan, you or your attorney must file a written objection to confirmation with the United States Bankruptcy

Court either electronically (if filer is approved for electronic filing) or at the following addresses:

- **For Eastern District cases** (Delta, Northern, or Central ***Batesville and Pine Bluff filed prior to 11/28/2019***): United States Bankruptcy Court, 300 West 2nd Street, Little Rock, AR 72201
- **For Western District cases** (El Dorado, Fayetteville, Fort Smith, Harrison, Hot Springs, or Texarkana Divisions): United States Bankruptcy Court, 35 E. Mountain Street, Fayetteville, AR 72701

The objection should be filed consistent with the following timelines:

- ☐ **Original plan filed *at the time* the petition is filed:** Within 14 days after the 341(a) meeting of creditors is concluded.
- ☐ **Original plan filed *after* the petition is filed or amended plan (only if filed *prior* to the 341(a) meeting):** Within the *later* of 14 days after the 341(a) meeting of creditors is concluded or 21 days after the filing of the plan.
- **Amended plan:** Within 21 days after the filing of the amended plan.

**The court may confirm this plan
without further notice if no objection to
confirmation is timely filed.**

The following matters may be of particular importance. ***Debtor(s) must check one box on each line to state whether or not the plan includes each of the following items. If all items are checked as "Not included" or if both boxes are checked, the provision will be ineffective if set out later in the plan.***

1.1	A limit on the amount of a secured claim, set out in Section 3.4, which may result in a partial payment or no payment at all to the secured creditor.	<input checked="" type="checkbox"/> Included	<input type="checkbox"/> Not included
1.2	Nonstandard plan provisions, set out in Part 8.	<input type="checkbox"/> Included	<input checked="" type="checkbox"/> Not included

Part 2: Plan Payments and Length of Plan

2.1 The debtor(s) will make regular payments to the trustee as follows:

Inapplicable portions below need not be completed or reproduced.

Amended plan: Plan payments will change to \$553.08 per month beginning on the later of the date of filing of the amended plan or ____.

The plan length is 60 months.

The following provision will apply if completed:

Plan payments will change to \$_ per month beginning on_.

Plan payments will change to \$_ per month beginning on_.

(Use additional lines as necessary)

The debtor(s) will pay all disposable income into the plan for not less than the required plan term, or the applicable commitment period, if applicable, unless unsecured creditors are being paid in full (100%). If fewer than 60 months of payments are specified, additional monthly payments will be made to the extent necessary to make the payments to creditors specified in this plan.

2.2 Payments shall be made from future income in the following manner:

Name of debtor **Thomas Lee Keathley, Sr.**

☒ Direct pay of entire plan payment or __ (portion of payment) per month.

☐ Employer Withholding of \$__ per month

Payment frequency: ☐ monthly, ☐ semi-monthly, ☐ bi-weekly ☐ weekly, ☐ Other

If other, please specify:____

Employer name: _____

Address: _____

Phone: _____

Name of debtor **Connie Irene Keathley, Sr.**

☐ Direct pay of entire plan payment or __ (portion of payment) per month.

☐ Employer Withholding of \$__ per month

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Payment frequency: ☐ monthly, ☐ semi-monthly, ☐ bi-weekly ☐ weekly, ☐ Other

If other, please specify: _____

Employer name: _____

Address: _____

Phone: _____

2.3 Income tax refunds.

Check one.

☒ Debtor(s) will retain income tax refunds received during the plan term and have allocated the refunds in the budget.

☐ Debtor(s) will supply the trustee with a copy of each income tax return filed during the plan term within 14 days of filing the return and will turn over to the trustee all income tax refunds received during the plan term.

☐ Debtor(s) will treat income tax refunds as described below. The debtor(s) will supply the trustee with a copy of each income tax return filed during the plan term within 14 days of filing.

2.4 Additional payments.

Check one.

☒ None. *If "None" is checked, the rest of § 2.4 need not be completed or reproduced.*

☐ To fund the plan, debtor(s) will make additional payment(s) to the trustee from other sources, as specified below. Describe the source,

estimated amount, and date of each anticipated payment.

Part 3: Treatment of Secured Claims

3.1 Adequate Protection Payments.

Check one.

☐ None. *If “None” is checked, the rest of § 3.1 need not be completed or reproduced.*

☒ The debtor(s)’ plan payment to the trustee will be allocated to pay adequate protection payments to secured creditors as indicated below. The trustee shall be authorized to disburse adequate protection payments upon the filing of an allowed claim by the creditor. Preconfirmation adequate protection payments will be made until the plan is confirmed. Postconfirmation adequate protection payments will be made until administrative fees are paid (including the initial attorney’s fee). Payment of adequate protection payments will be limited to funds available.

Creditor and last 4 digits of account number	Collateral	Monthly payment amount	To be paid
Dept. Finance & Administration	Residence .25 acre encompassing house	50.00	<input checked="" type="checkbox"/> Pre-confirmation <input checked="" type="checkbox"/> Post-confirmation

	511 Apperson Dr. Marion, AR 72364		
--	--	--	--

3.2 Maintenance of payments and cure of default (long term-debts, including debts secured by real property that debtor(s) intend to retain).

Check one.

☐ None. *If "None" is checked, the rest of § 3.2 need not be completed or reproduced.*

☒ The debtor(s)' will maintain the current contractual installment payments on the secured claims listed below, including any changes required by the applicable contract and noticed in conformity with any applicable rules. These payments will be disbursed either by the trustee or directly by the debtor(s), as specified below. The debtor(s) will resume payments to the creditors upon completion of the plan, pursuant to the terms of the respective agreements. Any existing arrearage will be paid in full through disbursements by the trustee, with interest, if any, at the rate stated.

The current contractual installment payments for real estate may be increased or decreased, and the plan payment increased, if necessary, based upon information provided by the creditor and upon the absence of objection from the debtor(s) under applicable rules. Unless otherwise ordered by the court, the amounts listed on a filed and allowed proof of claim will control over any contrary amounts listed below

as to the current installment payment and arrearage amount. **If relief from the automatic stay is ordered as to any item of collateral listed in this paragraph, then, unless otherwise ordered by the court, all payments under this paragraph as to that collateral will cease, and all secured claims based on that collateral will no longer be treated by the plan.**

Creditor and last 4 digits of account number	Collateral	Monthly install- ment payment	Monthly installment payment disbursed by	Estimated arrearage amount	Monthly arrearage payment	Interest rate, if any, for arrearage payment
Rushmore Loan Manage- ment Svcs	Residence .25 acre encom- passing house 511 Apperson Dr. Marion, AR 72364	1,280.00	<input checked="" type="checkbox"/> Debtor(s) <input type="checkbox"/> Trustee	0.00	0.00	0.00%

3.3 Secured claims excluded from 11 U.S.C. § 506 (non-506 claims).

Check one.

☒ None. *If “None” is checked, the rest of § 3.3 need not be completed or reproduced.*

3.4 Claims for which § 506 valuation is applicable. Request for valuation of security, payment of fully secured claims, and modification of undersecured claims.

Check one.

☐ None. *If “None” is checked, the rest of § 3.4 need not be completed or reproduced.*

The remainder of this paragraph will be effective only if there is a check in the box “included” in § 1.1.

☒ The debtor(s) request that the court determine the value of the collateral securing the claims as listed below. For each nongovernmental secured claim listed below, the debtor(s) state that the value of the collateral securing the claim should be as set out in the column headed *Value of collateral*. For secured claims of governmental units, unless otherwise ordered by the court, the value of the collateral securing the claim listed in a proof of claim filed in accordance with the Bankruptcy Rules controls over any contrary amount listed below.

Secured claims will be paid the lesser of the amount of the claim or the value of the collateral with interest at the rate stated below. The portion of any allowed claim that exceeds the

value will be treated as an unsecured claim under Part 5 of this plan. If the amount of a creditor's secured claim is listed below as having no value, the creditor's allowed claim will be treated in its entirety as an unsecured claim under Part 5 of this plan. Unless otherwise ordered by the court, the claim amounts listed on a filed and allowed proof of claim will control over any contrary amount listed below, except as to value, interest rate and monthly payment.

The holder of any claim listed below as having value in the column headed *Value of collateral* will retain the lien on the property interest of the debtor(s) or the estate(s) until the earlier of: (a) payment of the underlying debt determined under nonbankruptcy law, or (b) discharge of the underlying debt under 11 U.S.C. § 1328, at which time the lien will terminate and be released by the creditor.

Creditor and last 4 digits of account number	Collateral	Purchase date	Debt/ estimated claim	Value of collateral	Interest rate	Monthly payment	Estimated unsecured amount
Dep. Finance & Admin- istration	Residence .25 acre encom- passing house 511 Apperson Dr. Marion, AR 72364		14,922.48	275,000.00	0.00%	248.71	0.00

3.5 Surrender of collateral.

■ None. *If “None” is checked, the rest of § 3.5 need not be completed or reproduced.*

3.6 Secured claims not provided treatment. In the event that a secured claim is filed and allowed that is not provided treatment in the plan, the trustee shall pay such creditor the claim amount *without interest* after this plan in all other respects has been completed.

Part 4: Treatment of Fees and Priority Claims

4.1 General.

Trustee’s fees and all allowed priority claims, including domestic support obligations, will be paid in full without postpetition interest.

4.2 Trustee’s fees.

Trustee’s fees are governed by statute and may change during the course of the case.

4.3 Attorney’s fees.

The attorney’s fee is subject to approval of the court by separate application. The following has been paid or will be paid if approved by the court:

Amount paid to attorney prior to filing:

\$ 0.00

Amount paid to paid by the Trustee:

\$ 2,000.00

Total fee requested:

\$ 2,000.00

Upon confirmation, the attorney shall receive an initial fee as provided in the application and approved by the court from funds paid by the debtor(s), after administrative costs have been

paid. The remaining fee will be paid at the percentage rate of the total disbursed to creditors each month provided in the application approved by the court.

The initial fee and percentage rate requested in the application are \$ 1,000.00 and 25.00 %, respectively.

4.4 Priority claims other than attorney's fees and those treated in § 4.5.

Filed and allowed priority claims (usually tax claims), including without limitation, the following listed below, will be paid in full in accordance with 11 U.S.C. § 1322(a)(2), unless otherwise indicated. For claims filed by governmental units, the categorization of the claim by the creditor (secured, priority, nonpriority unsecured) and amounts shall control over any contrary amounts unless otherwise ordered by the court.

Creditor	Nature of claim (if taxes, specify type and years)	Estimated claim amount
Internal Revenue Services	Taxes	1,823.32

4.5 Domestic support obligations.

Check one.

■ None. *If "None" is checked, the rest of § 4.5 need not be completed or reproduced.*

Part 5: Treatment of Nonpriority Unsecured Claims

5.1 Nonpriority unsecured claims.

Allowed nonpriority unsecured claims shall be paid at least as much as they would receive if the debtor(s) filed a Chapter 7 case. **Allowed nonpriority unsecured claims shall be paid in full (100%) unless a different treatment is indicated below.** For above median income debtor(s), the distribution to unsecured creditors includes any disposable income pool (monthly disposable income times 60 months) from Form 122C-2, unless the debtor(s) are unable to meet the disposable income pool based on the following circumstances: __

Check one, if applicable.

☒ A PRORATA dividend, including disposable income pool amounts, if applicable, from funds remaining after payment of all other classes of claims; or

☐ Other. Please specify ____

5.2 Special nonpriority unsecured claims and other separately classified nonpriority unsecured claims.

Check one.

☒ **None.** *If "None" is checked, the rest of § 5.2 need not be completed or reproduced.*

5.3 Maintenance of payments and cure of any default on nonpriority unsecured claims.

☒ **None.** *If "None" is checked, the rest of § 5.3 need not be completed or reproduced.*

Part 6: Contracts, Leases, Sales and Postpetition Claims

6.1 Executory Contracts and Unexpired Claims.

Check one.

■ None. *If “None” is checked, the rest of § 6.1 need not be completed or reproduced.*

6.2 Sale of assets.

Check one.

■ None. *If “None” is checked, the rest of § 6.2 need not be completed or reproduced.*

6.3 Claims not to be paid by the trustee.

Check one.

□ None. *If “None” is checked, the rest of § 6.3 need not be completed or reproduced.*

■ The following claims are to be paid directly to the creditor by the debtor(s) and not by the trustee. These claims include home mortgage, lease payments, and debts actually being paid by a party other than the debtor(s) (who is liable for the debt) from property that is not property of the estate.

Creditor	Payment to be paid by	Description of property/ nature of obligation
Rushmore Loan Management Svcs	■ Debtor(s) □ Other ____	Residence .25 acre encompassing house

		511 Apperson Dr. Marion, AR 72364
--	--	--

6.4 Postpetition claims.

☐ **None.** *If “None” is checked, the rest of § 6.4 need not be completed or reproduced.*

☒ Postpetition claims pursuant to 11 U.S.C. §§ 1305 and 1322(b)(6) may be added to the plan by the debtor(s) and, if the creditor elects to file a proof of claim with respect to the postpetition claim, the claim may be treated as though the claims arose before the commencement of the case, to be paid in full or in part through the plan. Upon completion of the case, any unpaid balance of such claim may be subject to discharge.

Part 7: Vesting of Property of the Estate

7.1 Property of the estate will vest in the debtor(s) upon:

Check applicable box.

☐ plan confirmation.

☒ entry of discharge.

☐ other: _____

Part 8: Nonstandard Plan Provisions

☒ **None.** *If “None” is checked, the rest of Part 8 need not be completed or reproduced.*

Part 9: Signatures

By filing this document, the attorney for the debtor(s) or the debtor(s) themselves, if not represented by an attorney, certify(ies) that the wording and order of the provisions in this Chapter 13 plan are identical to those contained in plan form used in the Eastern and Western Districts of Arkansas, other than any nonstandard provisions included in Part 8.

/s/ Bart Zeigenhorn Date March 1, 2022
Bart Zeigenhorn
Signature of Attorney for Debtor(s)

/s/ Thomas Lee Keathley, Sr. Date March 1, 2022
Thomas Lee Keathley, Sr.
/s/ Connie Irene Keathley Date March 1, 2022
Connie Irene Keathley
Signature(s) of Debtor(s)
(required if not represented by an attorney;
otherwise optional)

Addendum A – For Amended Plans**Listing of Additional Creditors
and Claims for Plan Purposes**

Note: While additional creditors may be listed on Addendum A, the debtor(s) also must file amended schedules as appropriate.

A.1 Prepetition Nonpriority Unsecured Claims

The following are creditors with prepetition nonpriority unsecured claims that are added to the plan. These creditors will be provided treatment as described in Part 5.1 of the plan.

Name and address of creditor	Last four digits of account number	Nature of debt and date incurred	Amount of debt
-NONE-			

A.2 Postpetition Nonpriority Unsecured Claims

The following are creditors with postpetition nonpriority unsecured claims pursuant to 11 U.S.C. §§ 1305 and 1322(b)(6) that are added to the plan by the debtor(s). The creditors listed below are entitled to participate in the debtor(s)' bankruptcy case at the election of the creditor.

A creditor may elect to participate in the plan by filing a proof of claim for the postpetition claim. The claim will be treated as though the claim arose before the commencement of the case and will be provided treatment as described in Part 5.1

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of the plan. Upon completion of the plan and case, any unpaid balance of such claim may be subject to discharge.

Name and address of creditor	Last four digits of account number	Nature of debt and date incurred	Amount of debt	Approval to incur obtained from trustee or court
-NONE-				Yes No

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[ROA 951-59]

**UNITED STATES BANKRUPTCY COURT
EASTERN DISTRICT OF ARKANSAS**

Thomas Lee Keathley, Sr. Case No. 2:19-
Debtor(s) Connie Irene Keathley bk-16848
Debtor(s) Chapter 13

Arkansas Chapter 13 Plan

(Local Form 13-1)

Original Plan ☐

Amended Plan ☒ **For an amended plan, all applicable provisions must be repeated from the previous plan(s). Provisions may not be incorporated by reference from previously filed plan(s).**

List below the sections of the plan that have been changed:

3.2, 4.4

State the reason(s) for the amended plan, including any changes of circumstances below. If creditors are to be added, please complete Addendum A as well as file any appropriate amended schedules.

The Amended Plan is filed:

☒ Before confirmation

☐ After confirmation

Part 1: Notices

To Debtors: This form sets out options that may be appropriate in some cases, but the presence of an option on the form does not indicate that the option is appropriate in your circumstances. Plans that do not comply with local rules and judicial rulings may not be confirmable.

Original plans and amended plans must have matrix(ces) attached or a separate certificate of service should be filed to reflect service in compliance Fed. R. Bankr. P. 2002.

To Creditors: Your rights may be affected by this plan. Your claim may be reduced, modified, or eliminated. You should read this plan carefully and discuss it with your attorney if you have one in this bankruptcy case. If you do not have an attorney, you may wish to consult one. If you oppose the plan's treatment of your claim or any provision of this plan, you or your attorney must file a written objection to confirmation with the United States Bankruptcy Court either electronically (if filer is approved for electronic filing) or at the following addresses:

- **For Eastern District cases** (Delta, Northern, or Central ***Batesville and Pine Bluff filed prior to 11/28/2019***): United States Bankruptcy Court, 300 West 2nd Street, Little Rock, AR 72201
- **For Western District cases** (El Dorado, Fayetteville, Fort Smith, Harrison, Hot Springs, or Texarkana Divisions): United States Bankruptcy Court, 35 E. Mountain Street, Fayetteville, AR 72701

The objection should be filed consistent with the following timelines:

- ☐ **Original plan filed *at the time* the petition is filed:** Within 14 days after the 341(a) meeting of creditors is concluded.
- ☐ **Original plan filed *after* the petition is filed or amended plan (only if filed *prior* to the 341(a) meeting):** Within the *later* of 14 days after the 341(a) meeting of creditors is concluded or 21 days after the filing of the plan.
- ☒ **Amended plan:** Within 21 days after the filing of the amended plan.

The court may confirm this plan without further notice if no objection to confirmation is timely filed.

The following matters may be of particular importance. ***Debtor(s) must check one box on each line to state whether or not the plan includes each of the following items. If all item is checked as “Not included” or if both boxes are checked, the provision will be ineffective if set out later in the plan.***

1.1	A limit on the amount of a secured claim, set out in Section 3.4, which may result in a partial payment or no payment at all to the secured creditor.	<input checked="" type="checkbox"/> Included	<input type="checkbox"/> Not included
1.2	Nonstandard plan provisions, set out in Part 8.	<input type="checkbox"/> Included	<input checked="" type="checkbox"/> Not included

Part 2: Plan Payments and Length of Plan

2.1 The debtor(s) will make regular payments to the trustee as follows:

Inapplicable portions below need not be completed or reproduced.

Amended plan: Plan payments will change to **\$474.75** per month beginning on the later of the date of filing of the amended plan or ____.

The plan length is **60** months.

The following provision will apply if completed:

Plan payments will change to \$_ per month beginning on_.

(Use additional lines as necessary)

The debtor(s) will pay all disposable income into the plan for not less than the required plan term, or the applicable commitment period, if applicable, unless unsecured creditors are being paid in full (100%). If fewer than 60 months of payments are specified, additional monthly payments will be made to the extent necessary to make the payments to creditors specified in this plan.

2.2 Payments shall be made from future income in the following manner:

Name of debtor **Thomas Lee Keathley, Sr.**

☐ Direct pay of entire plan payment or __ (portion of payment) per month.

☐ Employer Withholding of \$__ per month

Payment frequency: ☐ monthly, ☐ semi-monthly, ☐ bi-weekly ☐ weekly, ☐ Other

If other, please specify: ____

Employer name: _____

Address: _____

Phone: _____

Name of debtor **Connie Irene Keathley, Sr.**

☐ Direct pay of entire plan payment or __ (portion of payment) per month.

☐ Employer Withholding of \$__ per month

Payment frequency: ☐ monthly, ☐ semi-monthly, ☐ bi-weekly ☐ weekly, ☐ Other

If other, please specify: ____

Employer name: _____

Address: _____

Phone: _____

2.3 Income tax refunds.

Check one.

☒ Debtor(s) will retain income tax refunds received during the plan term and have allocated the refunds in the budget.

☐ Debtor(s) will supply the trustee with a copy of each income tax return filed during the plan term within 14 days of filing the return and will turn over to the trustee all income tax refunds received during the plan term.

☐ Debtor(s) will treat income tax refunds as described below. The debtor(s) will supply the trustee with a copy of each income tax return filed during the plan term within 14 days of filing.

2.4 Additional payments.

Check one.

☒ None. *If "None" is checked, the rest of § 2.4 need not be completed or reproduced.*

☐ To fund the plan, debtor(s) will make additional payment(s) to the trustee from other sources, as specified below. Describe the source, estimated amount, and date of each anticipated payment.

Part 3: Treatment of Secured Claims**3.1 Adequate Protection Payments.***Check one.*

☐ None. *If “None” is checked, the rest of § 3.1 need not be completed or reproduced.*

☒ The debtor(s)' plan payment to the trustee will be allocated to pay adequate protection payments to secured creditors as indicated below. The trustee shall be authorized to disburse adequate protection payments upon the filing of an allowed claim by the creditor. Preconfirmation adequate protection payments will be made until the plan is confirmed. Postconfirmation adequate protection payments will be made until administrative fees are paid (including the initial attorney's fee). Payment of adequate protection payments will be limited to funds available.

Creditor and last 4 digits of account number	Collateral	Monthly payment amount	To be paid
Dept. Finance & Administration	Residence .25 acre encompassing house 511 Apperson Dr. Marion, AR 72364	50.00	<input checked="" type="checkbox"/> Pre-confirmation <input checked="" type="checkbox"/> Post-confirmation

3.2 Maintenance of payments and cure of default (long term-debts, including debts secured by real property that debtor(s) intend to retain).

Check one.

☐ None. *If “None” is checked, the rest of § 3.2 need not be completed or reproduced.*

☒ The debtor(s) will maintain the current contractual installment payments on the secured claims listed below, including any changes required by the applicable contract and noticed in conformity with any applicable rules. These payments will be disbursed either by the trustee or directly by the debtor(s), as specified below. The debtor(s) will resume payments to the creditors upon completion of the plan, pursuant to the terms of the respective agreements. Any existing arrearage will be paid in full through disbursements by the trustee, with interest, if any, at the rate stated.

The current contractual installment payments for real estate may be increased or decreased, and the plan payment increased, if necessary, based upon information provided by the creditor and upon the absence of objection from the debtor(s) under applicable rules. Unless otherwise ordered by the court, the amounts listed on a filed and allowed proof of claim will control over any contrary amounts listed below as to the current installment payment and arrearage amount. **If relief from the automatic stay is ordered as to any item of collateral listed in this paragraph, then,**

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unless otherwise ordered by the court, all payments under this paragraph as to that collateral will cease, and all secured claims based on that collateral will no longer be treated by the plan.

Creditor and last 4 digits of account number	Collateral	Monthly install- ment payment	Monthly installment payment disbursed by	Estimated arrearage amount	Monthly arrearage payment	Interest rate, if any, for arrearage payment
Rushmore Loan Manage- ment Svcs	Residence .25 acre encom- passing house 511 Apperson Dr. Marion, AR 72364	1,280.00	<input checked="" type="checkbox"/> Debtor(s) <input type="checkbox"/> Trustee	0.00	0.00	0.00%

3.3 Secured claims excluded from 11 U.S.C. § 506 (non-506 claims).

Check one.

☒ None. *If “None” is checked, the rest of § 3.3 need not be completed or reproduced.*

3.4 Claims for which § 506 valuation is applicable. Request for valuation of security, payment of fully secured claims, and modification of undersecured claims.

Check one.

☐ None. *If “None” is checked, the rest of § 3.4 need not be completed or reproduced.*

The remainder of this paragraph will be effective only if there is a check in the box “included” in § 1.1.

☒ The debtor(s) request that the court determine the value of the collateral securing the claims as listed below. For each nongovernmental secured claim listed below, the debtor(s) state that the value of the collateral securing the claim should be as set out in the column headed *Value of collateral*. For secured claims of governmental units, unless otherwise ordered by the court, the value of the collateral securing the claim listed in a proof of claim filed in accordance with the Bankruptcy Rules controls over any contrary amount listed below.

Secured claims will be paid the lesser of the amount of the claim or the value of the collateral with interest at the rate stated below. The portion of any allowed claim that exceeds the value will be treated as an unsecured claim

under Part 5 of this plan. If the amount of a creditor's secured claim is listed below as having no value, the creditor's allowed claim will be treated in its entirety as an unsecured claim under Part 5 of this plan. Unless otherwise ordered by the court, the claim amounts listed on a filed and allowed proof of claim will control over any contrary amount listed below, except as to value, interest rate and monthly payment.

The holder of any claim listed below as having value in the column headed *Value of collateral* will retain the lien on the property interest of the debtor(s) or the estate(s) until the earlier of: (a) payment of the underlying debt determined under nonbankruptcy law, or (b) discharge of the underlying debt under 11 U.S.C. § 1328, at which time the lien will terminate and be released by the creditor.

Creditor and last 4 digits of account number	Collateral	Purchase date	Debt/ estimated claim	Value of collateral	Interest rate	Monthly payment	Estimated unsecured amount
Dep. Finance & Admin- istration	Residence .25 acre encom- passing house 511 Apperson Dr. Marion, AR 72364		14,922.48	275,000.00	0.00%	248.71	0.00

3.5 Surrender of collateral.

■ None. *If “None” is checked, the rest of § 3.5 need not be completed or reproduced.*

3.6 Secured claims not provided treatment. In the event that a secured claim is filed and allowed that is not provided treatment in the plan, the trustee shall pay such creditor the claim amount *without interest* after this plan in all other respects has been completed.

Part 4: Treatment of Fees and Priority Claims

4.1 General.

Trustee’s fees and all allowed priority claims, including domestic support obligations, will be paid in full without postpetition interest.

4.2 Trustee’s fees.

Trustee’s fees are governed by statute and may change during the course of the case.

4.3 Attorney’s fees.

The attorney’s fee is subject to approval of the court by separate application. The following has been paid or will be paid if approved by the court:

Amount paid to attorney prior to filing:	\$ <u>0.00</u>
Amount paid to paid by the Trustee:	\$ <u>2,000.00</u>
Total fee requested:	\$ <u>2,000.00</u>

Upon confirmation, the attorney shall receive an initial fee as provided in the application and approved by the court from funds paid by the debtor(s), after administrative costs have been

paid. The remaining fee will be paid at the percentage rate of the total disbursed to creditors each month provided in the application approved by the court.

The initial fee and percentage rate requested in the application are \$ 1,000.00 and 25.00 %, respectively.

4.4 Priority claims other than attorney's fees and those treated in § 4.5.

Filed and allowed priority claims (usually tax claims), including without limitation, the following listed below, will be paid in full in accordance with 11 U.S.C. § 1322(a)(2), unless otherwise indicated. For claims filed by governmental units, the categorization of the claim by the creditor (secured, priority, nonpriority unsecured) and amounts shall control over any contrary amounts unless otherwise ordered by the court.

Creditor	Nature of claim (if taxes, specify type and years)	Estimated claim amount
Internal Revenue Services	Taxes	1,823.32

4.5 Domestic support obligations.

Check one.

☒ None. *If "None" is checked, the rest of § 4.5 need not be completed or reproduced.*

Part 5: Treatment of Nonpriority Unsecured Claims

5.1 Nonpriority unsecured claims.

Allowed nonpriority unsecured claims shall be paid at least as much as they would receive if the debtor(s) filed a Chapter 7 case. **Allowed nonpriority unsecured claims shall be paid in full (100%) unless a different treatment is indicated below.** For above median income debtor(s), the distribution to unsecured creditors includes any disposable income pool (monthly disposable income times 60 months) from Form 122C-2, unless the debtor(s) are unable to meet the disposable income pool based on the following circumstances: __

Check one, if applicable.

☐ A PRORATA dividend, including disposable income pool amounts, if applicable, from funds remaining after payment of all other classes of claims; or

☒ Other. Please specify 100%

5.2 Special nonpriority unsecured claims and other separately classified nonpriority unsecured claims.

Check one.

☒ **None.** *If "None" is checked, the rest of § 5.2 need not be completed or reproduced.*

5.3 Maintenance of payments and cure of any default on nonpriority unsecured claims.

Check one.

■ None. *If “None” is checked, the rest of § 5.3 need not be completed or reproduced.*

Part 6: Contracts, Leases, Sales and Postpetition Claims

6.1 Executory Contracts and Unexpired Claims.

Check one.

■ None. *If “None” is checked, the rest of § 6.1 need not be completed or reproduced.*

6.2 Sale of assets.

Check one.

■ None. *If “None” is checked, the rest of § 6.2 need not be completed or reproduced.*

6.3 Claims not to be paid by the trustee.

Check one.

☐ **None.** *If “None” is checked, the rest of § 6.3 need not be completed or reproduced.*

■ The following claims are to be paid directly to the creditor by the debtor(s) and not by the trustee. These claims include home mortgage, lease payments, and debts actually being paid by a party other than the debtor(s) (who is liable for the debt) from property that is not property of the estate.

Creditor	Payment to be paid by	Description of property/ nature of obligation
Rushmore Loan Management Svcs	<input checked="" type="checkbox"/> Debtor(s) <input type="checkbox"/> Other ____	Residence .25 acre encompassing house 511 Apperson Dr. Marion, AR 72364

6.4 Postpetition claims.

☐ **None.** *If “None” is checked, the rest of § 6.4 need not be completed or reproduced.*

☒ Postpetition claims pursuant to 11 U.S.C. §§ 1305 and 1322(b)(6) may be added to the plan by the debtor(s) and, if the creditor elects to file a proof of claim with respect to the postpetition claim, the claim may be treated as though the claims arose before the commencement of the case, to be paid in full or in part through the plan. Upon completion of the case, any unpaid balance of such claim may be subject to discharge.

Part 7: Vesting of Property of the Estate

7.1 Property of the estate will vest in the debtor(s) upon:

Check applicable box.

☐ plan confirmation.

☒ entry of discharge.

☐ other: _____

Part 8: Nonstandard Plan Provisions

■ **None.** *If “None” is checked, the rest of Part 8 need not be completed or reproduced.*

Part 9: Signatures

By filing this document, the attorney for the debtor(s) or the debtor(s) themselves, if not represented by an attorney, certify(ies) that the wording and order of the provisions in this Chapter 13 plan are identical to those contained in plan form used in the Eastern and Western Districts of Arkansas, other than any nonstandard provisions included in Part 8.

/s/ Bart Zeigenhorn

Date March 10, 2020

Bart Zeigenhorn

Signature of Attorney for Debtor(s)

/s/ Thomas Lee Keathley, Sr.

Date March 10, 2020

Thomas Lee Keathley, Sr.

/s/ Connie Irene Keathley

Date March 10, 2020

Connie Irene Keathley

Signature(s) of Debtor(s)

(required if not represented by an attorney;
otherwise optional)

Addendum A – For Amended Plans

**Listing of Additional Creditors
and Claims for Plan Purposes**

Note: While additional creditors may be listed on Addendum A, the debtor(s) also must file amended schedules as appropriate.

A.1 Prepetition Nonpriority Unsecured Claims

The following are creditors with prepetition nonpriority unsecured claims that are added to the plan. These creditors will be provided treatment as described in Part 5.1 of the plan.

Name and address of creditor	Last four digits of account number	Nature of debt and date incurred	Amount of debt
-NONE-			

A.2 Postpetition Nonpriority Unsecured Claims

The following are creditors with postpetition nonpriority unsecured claims pursuant to 11 U.S.C. §§ 1305 and 1322(b)(6) that are added to the plan by the debtor(s). The creditors listed below are entitled to participate in the debtor(s)' bankruptcy case at the election of the creditor.

A creditor may elect to participate in the plan by filing a proof of claim for the postpetition claim. The claim will be treated as though the claim arose before the commencement of the case and will be provided treatment as described in Part 5.1

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of the plan. Upon completion of the plan and case, any unpaid balance of such claim may be subject to discharge.

Name and address of creditor	Last four digits of account number	Nature of debt and date incurred	Amount of debt	Approval to incur obtained from trustee or court
-NONE-				Yes No

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[ROA 960-68]

**UNITED STATES BANKRUPTCY COURT
EASTERN DISTRICT OF ARKANSAS**

Debtor(s) Thomas Lee Keathley, Sr. Case No. 2:19-
Connie Irene Keathley bk-16848

Arkansas Chapter 13 Plan
(Local Form 13-1)

Original Plan ☐

Amended Plan ☒ **For an amended plan, all applicable provisions must be repeated from the previous plan(s). Provisions may not be incorporated by reference from previously filed plan(s).**

List below the sections of the plan that have been changed:

2.1

State the reason(s) for the amended plan, including any changes of circumstances below. If creditors are to be added, please complete Addendum A as well as file any appropriate amended schedules.

Increase to pay unsecured creditors 100%

The Amended Plan is filed:

☐ Before confirmation

☒ After confirmation

Part 1: Notices

To Debtors: This form sets out options that may be appropriate in some cases, but the presence of an option on the form does not indicate that the option is appropriate in your circumstances. Plans that do not comply with local rules and judicial rulings may not be confirmable.

Original plans and amended plans must have matrix(ces) attached or a separate certificate of service should be filed to reflect service in compliance Fed. R. Bankr. P. 2002.

To Creditors: Your rights may be affected by this plan. Your claim may be reduced, modified, or eliminated. You should read this plan carefully and discuss it with your attorney if you have one in this bankruptcy case. If you do not have an attorney, you may wish to consult one. If you oppose the plan's treatment of your claim or any provision of this plan, you or your attorney must file a written objection to confirmation with the United States Bankruptcy Court either electronically (if filer is approved for electronic filing) or at the following addresses:

- **For Eastern District cases** (Delta, Northern, or Central ***Batesville and Pine Bluff filed prior to 11/28/2019***): United States Bankruptcy Court, 300 West 2nd Street, Little Rock, AR 72201
- **For Western District cases** (El Dorado, Fayetteville, Fort Smith, Harrison, Hot Springs, or Texarkana Divisions): United States Bankruptcy Court, 35 E. Mountain Street, Fayetteville, AR 72701

The objection should be filed consistent with the following timelines:

The objection should be filed consistent with the following timelines:

- ☐ **Original plan filed *at the time* the petition is filed:** Within 14 days after the 341(a) meeting of creditors is concluded.
- ☐ **Original plan filed *after* the petition is filed or amended plan (only if filed *prior* to the 341(a) meeting):** Within the *later* of 14 days after the 341(a) meeting of creditors is concluded or 21 days after the filing of the plan.
- ☒ **Amended plan:** Within 21 days after the filing of the amended plan.

The court may confirm this plan without further notice if no objection to confirmation is timely filed.

The following matters may be of particular importance. ***Debtor(s) must check one box on each line to state whether or not the plan includes each of the following items. If all items are checked as "Not included" or if both boxes are checked, the provision will be ineffective if set out later in the plan.***

1.1	A limit on the amount of a secured claim, set out in Section 3.4, which may result in a partial payment or no payment at all to the secured creditor.	<input checked="" type="checkbox"/> Included	<input type="checkbox"/> Not included
1.2	Nonstandard plan provisions, set out in Part 8.	<input type="checkbox"/> Included	<input checked="" type="checkbox"/> Not included

Part 2: Plan Payments and Length of Plan

2.1 The debtor(s) will make regular payments to the trustee as follows:

Inapplicable portions below need not be completed or reproduced.

Amended plan: Plan payments will change to **\$599.71** per month beginning on the later of the date of filing of the amended plan or ____.

The plan length is **60** months.

The following provision will apply if completed:

Plan payments will change to \$__ per month beginning on__.

(Use additional lines as necessary)

The debtor(s) will pay all disposable income into the plan for not less than the required plan term, or the applicable commitment period, if applicable, unless unsecured creditors are being paid in full (100%). If fewer than 60 months of payments are specified, additional monthly payments will be made to the extent necessary to make the payments to creditors specified in this plan.

2.2 Payments shall be made from future income in the following manner:

Name of debtor **Thomas Lee Keathley, Sr.**

☒ Direct pay of entire plan payment or __ (portion of payment) per month.

☐ Employer Withholding of \$__ per month

Payment frequency: ☐ monthly, ☐ semi-monthly, ☐ bi-weekly ☐ weekly, ☐ Other

If other, please specify:____

Employer name: _____

Address: _____

Phone: _____

Name of debtor **Connie Irene Keathley, Sr.**

☐ Direct pay of entire plan payment or __ (portion of payment) per month.

☐ Employer Withholding of \$__ per month

Payment frequency: ☐ monthly, ☐ semi-monthly, ☐ bi-weekly ☐ weekly, ☐ Other

If other, please specify: _____

Employer name: _____

Address: _____

Phone: _____

2.3 Income tax refunds.

Check one.

☒ Debtor(s) will retain income tax refunds received during the plan term and have allocated the refunds in the budget.

☐ Debtor(s) will supply the trustee with a copy of each income tax return filed during the plan term within 14 days of filing the return and will turn over to the trustee all income tax refunds received during the plan term.

☐ Debtor(s) will treat income tax refunds as described below. The debtor(s) will supply the trustee with a copy of each income tax return filed during the plan term within 14 days of filing.

2.4 Additional payments.

Check one.

☒ None. *If "None" is checked, the rest of § 2.4 need not be completed or reproduced.*

☐ To fund the plan, debtor(s) will make additional payment(s) to the trustee from other sources, as specified below. Describe the source,

estimated amount, and date of each anticipated payment.

Part 3: Treatment of Secured Claims

3.1 Adequate Protection Payments.

Check one.

☐ None. *If “None” is checked, the rest of § 3.1 need not be completed or reproduced.*

☒ The debtor(s)' plan payment to the trustee will be allocated to pay adequate protection payments to secured creditors as indicated below. The trustee shall be authorized to disburse adequate protection payments upon the filing of an allowed claim by the creditor. Preconfirmation adequate protection payments will be made until the plan is confirmed. Postconfirmation adequate protection payments will be made until administrative fees are paid (including the initial attorney's fee). Payment of adequate protection payments will be limited to funds available.

Creditor and last 4 digits of account number	Collateral	Monthly payment amount	To be paid
Dept. Finance & Administration	Residence .25 acre encompassing house	50.00	<input checked="" type="checkbox"/> Pre-confirmation <input checked="" type="checkbox"/> Post-confirmation

	511 Apperson Dr. Marion, AR 72364		
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3.2 Maintenance of payments and cure of default (long term-debts, including debts secured by real property that debtor(s) intend to retain).

Check one.

☐ None. *If "None" is checked, the rest of § 3.2 need not be completed or reproduced.*

☒ The debtor(s) will maintain the current contractual installment payments on the secured claims listed below, including any changes required by the applicable contract and noticed in conformity with any applicable rules. These payments will be disbursed either by the trustee or directly by the debtor(s), as specified below. The debtor(s) will resume payments to the creditors upon completion of the plan, pursuant to the terms of the respective agreements. Any existing arrearage will be paid in full through disbursements by the trustee, with interest, if any, at the rate stated.

The current contractual installment payments for real estate may be increased or decreased, and the plan payment increased, if necessary, based upon information provided by the creditor and upon the absence of objection from the debtor(s) under applicable rules. Unless otherwise ordered by the court, the amounts listed on a filed and allowed proof of claim will control over any contrary amounts listed below

as to the current installment payment and arrearage amount. **If relief from the automatic stay is ordered as to any item of collateral listed in this paragraph, then, unless otherwise ordered by the court, all payments under this paragraph as to that collateral will cease, and all secured claims based on that collateral will no longer be treated by the plan.**

Creditor and last 4 digits of account number	Collateral	Monthly install- ment payment	Monthly installment payment disbursed by	Estimated arrearage amount	Monthly arrearage payment	Interest rate, if any, for arrearage payment
Rushmore Loan Manage- ment Svcs	Residence .25 acre encom- passing house 511 Apperson Dr. Marion, AR 72364	1,280.00	<input checked="" type="checkbox"/> Debtor(s) <input type="checkbox"/> Trustee	0.00	0.00	0.00%

3.3 Secured claims excluded from 11 U.S.C. § 506 (non-506 claims).

Check one.

☒ None. *If “None” is checked, the rest of § 3.3 need not be completed or reproduced.*

3.4 Claims for which § 506 valuation is applicable. Request for valuation of security, payment of fully secured claims, and modification of undersecured claims.

Check one.

☐ None. *If “None” is checked, the rest of § 3.4 need not be completed or reproduced.*

The remainder of this paragraph will be effective only if there is a check in the box “included” in § 1.1.

☒ The debtor(s) request that the court determine the value of the collateral securing the claims as listed below. For each nongovernmental secured claim listed below, the debtor(s) state that the value of the collateral securing the claim should be as set out in the column headed *Value of collateral*. For secured claims of governmental units, unless otherwise ordered by the court, the value of the collateral securing the claim listed in a proof of claim filed in accordance with the Bankruptcy Rules controls over any contrary amount listed below.

Secured claims will be paid the lesser of the amount of the claim or the value of the collateral with interest at the rate stated below. The portion of any allowed claim that exceeds the value will be treated as an unsecured claim

under Part 5 of this plan. If the amount of a creditor's secured claim is listed below as having no value, the creditor's allowed claim will be treated in its entirety as an unsecured claim under Part 5 of this plan. Unless otherwise ordered by the court, the claim amounts listed on a filed and allowed proof of claim will control over any contrary amount listed below, except as to value, interest rate and monthly payment.

The holder of any claim listed below as having value in the column headed *Value of collateral* will retain the lien on the property interest of the debtor(s) or the estate(s) until the earlier of: (a) payment of the underlying debt determined under nonbankruptcy law, or (b) discharge of the underlying debt under 11 U.S.C. § 1328, at which time the lien will terminate and be released by the creditor.

Creditor and last 4 digits of account number	Collateral	Purchase date	Debt/ estimated claim	Value of collateral	Interest rate	Monthly payment	Estimated unsecured amount
Dep. Finance & Admin- istration	Residence .25 acre encom- passing house 511 Apperson Dr. Marion, AR 72364		14,922.48	275,000.00	0.00%	248.71	0.00

3.5 Surrender of collateral.

■ None. *If “None” is checked, the rest of § 3.5 need not be completed or reproduced.*

3.6 Secured claims not provided treatment. In the event that a secured claim is filed and allowed that is not provided treatment in the plan, the trustee shall pay such creditor the claim amount *without interest* after this plan in all other respects has been completed.

Part 4: Treatment of Fees and Priority Claims

4.1 General.

Trustee’s fees and all allowed priority claims, including domestic support obligations, will be paid in full without postpetition interest.

4.2 Trustee’s fees.

Trustee’s fees are governed by statute and may change during the course of the case.

4.3 Attorney’s fees.

The attorney’s fee is subject to approval of the court by separate application. The following has been paid or will be paid if approved by the court:

Amount paid to attorney prior to filing:

\$ 0.00

Amount paid to paid by the Trustee:

\$ 2,000.00

Total fee requested:

\$ 2,000.00

Upon confirmation, the attorney shall receive an initial fee as provided in the application and approved by the court from funds paid by the debtor(s), after administrative costs have been

paid. The remaining fee will be paid at the percentage rate of the total disbursed to creditors each month provided in the application approved by the court.

The initial fee and percentage rate requested in the application are \$ 1,000.00 and 25.00 %, respectively.

4.4 Priority claims other than attorney's fees and those treated in § 4.5.

Filed and allowed priority claims (usually tax claims), including without limitation, the following listed below, will be paid in full in accordance with 11 U.S.C. § 1322(a)(2), unless otherwise indicated. For claims filed by governmental units, the categorization of the claim by the creditor (secured, priority, nonpriority unsecured) and amounts shall control over any contrary amounts unless otherwise ordered by the court.

Creditor	Nature of claim (if taxes, specify type and years)	Estimated claim amount
Internal Revenue Services	Taxes	1,823.32

4.5 Domestic support obligations.

Check one.

■ None. *If "None" is checked, the rest of § 4.5 need not be completed or reproduced.*

Part 5: Treatment of Nonpriority Unsecured Claims

5.1 Nonpriority unsecured claims.

Allowed nonpriority unsecured claims shall be paid at least as much as they would receive if the debtor(s) filed a Chapter 7 case. **Allowed nonpriority unsecured claims shall be paid in full (100%) unless a different treatment is indicated below.** For above median income debtor(s), the distribution to unsecured creditors includes any disposable income pool (monthly disposable income times 60 months) from Form 122C-2, unless the debtor(s) are unable to meet the disposable income pool based on the following circumstances: __

Check one, if applicable.

☐ A PRORATA dividend, including disposable income pool amounts, if applicable, from funds remaining after payment of all other classes of claims; or

☒ Other. Please specify 100%

5.2 Special nonpriority unsecured claims and other separately classified nonpriority unsecured claims.

Check one.

☒ **None.** *If "None" is checked, the rest of § 5.2 need not be completed or reproduced.*

5.3 Maintenance of payments and cure of any default on nonpriority unsecured claims.

☒ **None.** *If "None" is checked, the rest of § 5.3 need not be completed or reproduced.*

Part 6: Contracts, Leases, Sales and Postpetition Claims

6.1 Executory Contracts and Unexpired Claims.

Check one.

■ None. *If “None” is checked, the rest of § 6.1 need not be completed or reproduced.*

6.2 Sale of assets.

Check one.

■ None. *If “None” is checked, the rest of § 6.2 need not be completed or reproduced.*

6.3 Claims not to be paid by the trustee.

Check one.

□ None. *If “None” is checked, the rest of § 6.3 need not be completed or reproduced.*

■ The following claims are to be paid directly to the creditor by the debtor(s) and not by the trustee. These claims include home mortgage, lease payments, and debts actually being paid by a party other than the debtor(s) (who is liable for the debt) from property that is not property of the estate.

Creditor	Payment to be paid by	Description of property / nature of obligation
Rushmore Loan Management Svcs	■ Debtor(s) □ Other ____	Residence .25 acre encompassing house

		511 Apperson Dr. Marion, AR 72364
--	--	--

6.4 Postpetition claims.

☐ **None.** *If “None” is checked, the rest of § 6.4 need not be completed or reproduced.*

☒ Postpetition claims pursuant to 11 U.S.C. §§ 1305 and 1322(b)(6) may be added to the plan by the debtor(s) and, if the creditor elects to file a proof of claim with respect to the postpetition claim, the claim may be treated as though the claims arose before the commencement of the case, to be paid in full or in part through the plan. Upon completion of the case, any unpaid balance of such claim may be subject to discharge.

Part 7: Vesting of Property of the Estate**7.1 Property of the estate will vest in the debtor(s) upon:**

Check applicable box.

☐ plan confirmation.

☒ entry of discharge.

☐ other: _____

Part 8: Nonstandard Plan Provisions

☒ **None.** *If “None” is checked, the rest of Part 8 need not be completed or reproduced.*

Part 9: Signatures

By filing this document, the attorney for the debtor(s) or the debtor(s) themselves, if not represented by an attorney, certify(ies) that the wording and order of the provisions in this Chapter 13 plan are identical to those contained in plan form used in the Eastern and Western Districts of Arkansas, other than any nonstandard provisions included in Part 8.

/s/ Bart Zeigenhorn Date June 27, 2022
Bart Zeigenhorn
Signature of Attorney for Debtor(s)

/s/ Thomas Lee Keathley, Sr. Date June 27, 2022
Thomas Lee Keathley, Sr.

/s/ Connie Irene Keathley Date June 27, 2022
Connie Irene Keathley
Signature(s) of Debtor(s)

(required if not represented by an attorney;
otherwise optional)

Addendum A – For Amended Plans

**Listing of Additional Creditors
and Claims for Plan Purposes**

Note: While additional creditors may be listed on Addendum A, the debtor(s) also must file amended schedules as appropriate.

A.1 Prepetition Nonpriority Unsecured Claims

The following are creditors with prepetition nonpriority unsecured claims that are added to the plan. These creditors will be provided treatment as described in Part 5.1 of the plan.

Name and address of creditor	Last four digits of account number	Nature of debt and date incurred	Amount of debt
-NONE-			

A.2 Postpetition Nonpriority Unsecured Claims

The following are creditors with postpetition nonpriority unsecured claims pursuant to 11 U.S.C. §§ 1305 and 1322(b)(6) that are added to the plan by the debtor(s). The creditors listed below are entitled to participate in the debtor(s)' bankruptcy case at the election of the creditor.

A creditor may elect to participate in the plan by filing a proof of claim for the postpetition claim. The claim will be treated as though the claim arose before the commencement of the case and will be provided treatment as described in Part 5.1

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of the plan. Upon completion of the plan and case, any unpaid balance of such claim may be subject to discharge.

Name and address of creditor	Last four digits of account number	Nature of debt and date incurred	Amount of debt	Approval to incur obtained from trustee or court
-NONE-				Yes No

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[ROA 969]

IN THE UNITED STATES BANKRUPTCY COURT
EASTERN DISTRICT OF ARKANSAS
DELTA DIVISION

IN RE: Thomas Lee CASE NO: 2:19-bk-
Keathley Sr. and Connie 16848 J
Irene Keathley Chapter 13

ORDER CONFIRMING CHAPTER 13 PLAN AS
MODIFIED ON 06/27/2022

The Court finds that the modified plan as filed by the debtors on 06/27/2022 complies with all provisions of Chapter 13 and with all other provisions of Title 11 of the United States Code; that all fees, charges, or amounts required under Chapter 123 of Title 28 or by the plan, to be paid before confirmation, have been paid; that the plan has been proposed in good faith and not by any means forbidden by law; that the plan complies with Section 1325 of the United States Bankruptcy Code and that the plan should be confirmed. Therefore,

IT IS ORDERED:

1. All objections to the modified plan are withdrawn or, by entry of this order, overruled. The plan should be and hereby is confirmed. To effectuate the plan, the debtors shall pay to the trustee according to the plan, which shall be in compliance with applicable federal law. The payments shall continue until further orders of the Court.

2. Notwithstanding any plan term to the contrary, the debtors may not obtain a refund or

disbursement from the trustee without a court order after notice and hearing, except that upon conversion to a Chapter 7 case, the Trustee is ordered to return undistributed postpetition wages or regular income to the debtor unless otherwise ordered by the court.

3. Notwithstanding the provisions of the chapter 13 plan, the Trustee shall receive such percentage fee of plan payments as may be periodically fixed by the Attorney General pursuant to 28 U.S.C. §586 and pursuant to 11 U.S.C. §1326(b)(2).

4. Whenever the plan confirmed by this order refers to the debt, debts, claim or claims of creditors, such reference shall be construed to mean allowed claim or allowed claims. The total amount of an allowed claim shall be the amount stated on a proof of claim properly filed by or on behalf of such creditor, unless the Court determines a different amount following the filing of an objection to such claim.

IT IS SO ORDERED.

Date: 07/20/2022 /s/ Phyllis M. Jones
Phyllis M. Jones
U.S. Bankruptcy Judge

cc: Thomas Lee Keathley Sr and Connie Irene
Keathley, Debtor (s)
Bart Ziegenhorn, Debtor's Attorney
Mark T. McCarty, Trustee
All Creditors

Fill in this information to identify your case:
United States Bankruptcy Court for the: <u>EASTERN DISTRICT OF ARKANSAS</u>
Case Number (<i>if known</i>) _____
Chapter you are filing under:
<input type="checkbox"/> Chapter 7
<input type="checkbox"/> Chapter 11
<input type="checkbox"/> Chapter 12
<input checked="" type="checkbox"/> Chapter 13

☐ Check if this is an amended filing

Official Form 101

**Voluntary Petition for Individuals Filing for
Bankruptcy** **12/17**

The bankruptcy forms use you and Debtor 1 to refer to a debtor filing alone. A married couple may file a bankruptcy case together—called a joint case—and in joint cases, these forms use you to ask for information from both debtors. For example, if a form asks, “Do you own a car,” the answer would be yes if either debtor owns a car. When information is needed about the spouses separately, the form uses *Debtor 1* and *Debtor 2* to distinguish between them. In joint cases, one of the spouses must report information as *Debtor 1* and the other as Debtor 2. The same person must be Debtor 1 in all of the forms.

Be as complete and accurate as possible. If two married people are filing together, both are

equally responsible for supplying correct information. If more space is needed, attach a separate sheet to this form. On the top of any additional pages, write your name and case number (if known). Answer every question.

Part 1: Identify Yourself

About Debtor 1:	About Debtor 2 (Spouse Only in a Joint Case)
-----------------	---

1. Your full name

Thomas
First name

Connie
Middle name

Lee
Middle name

Irene
Middle name

Keathley, Sr.
Last name and Suffix
(Sr., Jr., II, III)

Keathley
Last name and Suffix
(Sr., Jr., II, III)

[instructions omitted]

**2. All other names
you have used in the
last 8 years**

Include your married or
maiden names.

**3. Only the last 4
digits of your Social
Security number or
federal individual
Taxpayer
Identification
number (ITIN)**

* * *

* * *

4. Any business names and Employer Identification Numbers (EIN) you have used in the last 8 years

☒ I have not used any business names or EINs

* * *

☒ I have not used any business names or EINs

* * *

5. Where you live

511 Apperson Dr.
Marion, AR 72364
 Number, Street, City,
 State & ZIP Code
Crittenden
 County

* * *

* * *

6. Why you are choosing *this district* to file for bankruptcy

Check one:

☒ Over the last 180 days before filing this petition, I have lived in this district longer than in any other district

Check one:

☒ Over the last 180 days before filing this petition, I have lived in this district longer than in any other district

☐ I have another reason. Explain (See 28 U.S.C. § 1408.)

☐ I have another reason. Explain (See 28 U.S.C. § 1408.)

Part 2: Tell the Court About Your Bankruptcy Case

7. The chapter of the Bankruptcy Code you are choosing to file under

Check one. (For a brief description of each, see *Notice Required by U.S.C. § 342(b) for Individuals Filing for Bankruptcy (Form 2010)*. Also, go to the top of page 1 and check the appropriate box.)

- ☐ Chapter 7
- ☐ Chapter 11
- ☐ Chapter 12
- ☒ Chapter 13

8. How you will pay the fee

☒ **I will pay the entire fee when I file my petition.** Please check with the clerk's office in your local court for more details about how you may pay. Typically, if you are paying the fee yourself, you may pay with cash, cashier's check, or money order. If your attorney is submitting your payment on your behalf, your attorney may pay with a credit card or check with a pre-printed address.

☐ **I need to pay the fee in installments.** If you choose this option, sign and attach the *Application for Individuals to Pay The Filing Fee in Installments* (Official Form 103A).

☐ **I request that my fee be waived** (You may request this option only if you are filing for

Chapter 7. By law, a judge may, but is not required to, waive your fee, and may do so only if your income is less than 150% of the official poverty line that applies to your family size and you are unable to pay the fee in installments). If you choose this option, you must fill out the *Application to Have the Chapter 7 Filing Fee Waived* (Official Form 103B) and file it with your petition.

9. Have you filed for bankruptcy within the last 8 years?

☐ No.

☒ Yes.

Eastern District of
District Arkansas

When 3/11/15 Case Number 15-11143

District Eastern District of AR

When 8/07/03 Case Number 03-19383

10. Are any bankruptcy cases pending or being filed by a spouse who is not filing this case with you, or by a business partner, or by an affiliate?

☒ No

☐ Yes.

* * *

11. Do you rent your residence?

☒ No

☐ Yes.

* * *

**Part 3: Report About Any Businesses You Own
as a Sole Proprietor**

**12. Are you a sole proprietor of any full- or
part-time business?**

☒ No. Go to Part 4.

☐ Yes.

* * *

**13. Are you filing under Chapter 11 of the
Bankruptcy Code and are you a *small
business debtor*?** For a definition of small
business debtor, see 11 U.S.C. § 101(51D).

* * *

*If you are filing under Chapter 11, the court must
know whether you are a small business debtor so
that it can set appropriate deadlines. If you indicate
that you are a small business debtor, you must
attach your most recent balance sheet, statement of
operations, cash-flow statement, and federal
income tax return or if any of these documents do
not exist, follow the procedure in 11 U.S.C.
1116(1)(B).*

☒ No. I am not filing under Chapter 11.

☐ No. I am filing under Chapter 11, but I am
NOT a small business debtor according to the
definition in the Bankruptcy Code.

☐ Yes. I am filing under Chapter 11 and I am a
small business debtor according to the definition in
the Bankruptcy Code.

Part 4: Report if You Own or Have Any Hazardous Property or Any Property That Needs Immediate Attention

14. Do you own or have any property that poses or is alleged to pose a threat of imminent and identifiable hazard to public health or safety? Or do you own any property that needs immediate attention?

- ☐ No
☐ Yes.

* * *

Part 5: Explain Your Efforts to Receive a Briefing About Credit Counseling

About Debtor 1:	About Debtor 2 (Spouse Only in a Joint Case)
-----------------	---

15. Tell the court whether you received a briefing about credit counseling.

The law requires that you receive a briefing about credit counseling before you file for bankruptcy. You must truthfully check one of the following choices. If you cannot do so, you are not eligible to file.

If you file anyway, the court can dismiss your case, you will lose

whatever filing fee you paid, and your creditors can begin collection activities again.

You must check one:

■ I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, and I received a certificate of completion. Attach a copy of the certificate and the payment plan, if any, that you developed with the agency.

[additional choices omitted]

You must check one:

■ I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, and I received a certificate of completion. Attach a copy of the certificate and the payment plan, if any, that you developed with the agency.

[additional choices omitted]

Part 6: Answer These Questions for Reporting Purposes

16. What kind of debts do you have?

16a. Are your debts primarily consumer debts?

Consumer debts are defined in 11 U.S.C. § 101(8) as “incurred by an individual primarily for a personal, family, or household purpose.”

☐ No. Go to line 16b.

■ Yes. Go to line 17.

* * *

**17. Are you
filing under
Chapter 7?**

**Do you
estimate that
after any
exempt
property is
excluded and
administrative
expenses are
paid that
funds will be
available for
distribution to
unsecured
creditors?**

☒ No. I am not filing under Chapter 7. Go to line 18.

☐ Yes. am filing under Chapter 7. Do you estimate that after any exempt property is excluded and administrative expenses are paid that funds will be available to distribute to unsecured creditors.

* * *

**18. How many
Creditors do
you estimate
that you owe?**

☒ 1-49.

* * *

**19. How much
do you
estimate your
assets to be
worth?**

☐ \$0 - \$50,000

☐ \$50,001 - \$100,000

☒ \$100,001 - \$500,000

* * *

**20. How much
do you
estimate your**

☐ \$0 - \$50,000

☐ \$50,001 - \$100,000

☒ \$100,001 - \$500,000

**liabilities to
be?**

* * *

Part 7: Sign Below

For you

I have examined this petition, and I declare under penalty of perjury that the information provided is true and correct.

If I have chosen to file under Chapter 7, I am aware that I may proceed, if eligible, under Chapter 7, 11, 12, or 13 of title 11, United States Code. I understand the relief available under each chapter, and I choose to proceed under Chapter 7.

If no attorney represents me and I did not pay or agree to pay someone who is not an attorney to help me fill out this document, I have obtained and read the notice required by 11 U.S.C. § 342(b)

I request relief in accordance with the chapter of title 11, United States Code, specified in this petition.

I understand making a false statement, concealing property, or obtaining money or property by fraud in connection with a bankruptcy case can result in

finer up to \$250,000, or imprisonment for up to 20 years, or both. 18 U.S.C. §§ 152, 1341, 1519, and 3571.

/s/ Thomas Lee Keathley, Sr.

Thomas Lee Keathley, Sr.

Signature of Debtor 1

Executed on December 27, 2019
MM/DD/YYYY

/s/ Connie Irene Keathley

Connie Irene Keathley

Signature of Debtor 2

Executed on December 27, 2019
MM/DD/YYYY

For your attorney, if you are represented by one
If you are not represented by an attorney, you do not need to file this page.

I, the attorney for the debtor(s) named in this petition, declare that I have informed the debtor(s) about eligibility to proceed under Chapter 7, 11, 12, or 13 of title 11, United States Code, and have explained the relief available under each chapter for which the person is eligible. I also certify that I have delivered to the debtor(s) the notice required by 11 U.S.C. § 342(b) and, in a case in which § 707(b)(4)(D) applies, certify that I have no knowledge after an inquiry that the information in the schedules filed with the petition is incorrect.

JA-79

/s/ Bart Ziegenhorn

Signature of Attorney for Debtor

Date December 27, 2019

MM/DD/YYYY

Bart Ziegenhorn

Printed name

P.O. Box 830

West Memphis, AR 72301

Number, Street, City, State &
ZIP Code

Contact phone (870) 732-9100

Email address _____

AR 93140 AR

Bar number & State

Fill in this information to identify your case:
Debtor 1: <u>Thomas Lee Keathley, Sr.</u>
First Name Middle Name Last Name
Debtor 2 (Spouse if, filing) <u>Connie Irene Keathley</u>
First Name Middle Name Last Name
United States Bankruptcy Court for the: <u>EASTERN DISTRICT OF ARKANSAS</u>
Case Number _____ (if known)

☐ Check if this is an amended filing

Official Form 106Sum

**Summary of Your Assets and Liabilities and
Certain Statistical Information** **12/15**

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. Fill out all of your schedules first; then complete the information on this form. If you are filing amended schedules after you file your original forms, you must fill out a new *Summary* and check the box at the top of this page.

Part 1: Summarize Your Assets

Your assets

Value of what you own

1. Schedule A/B:**Property** (Official Form 106A/B)

1a. Copy line 55, Total
real estate, from
Schedule A/B \$ 276,000.00

1b. Copy line 62, Total
personal property, from
Schedule A/B \$ 18,150.00

1c. Copy line 63, Total of
all property on Schedule
A/B \$ 294,150.00

Part 2: Summarize Your Liabilities

Your liabilities

Amount you owe

**2. Schedule D: Creditors
Who Have Claims Secured
by Property** (Official Form 106D)

2a. *Schedule D:
Creditors Who Have
Claims Secured by
Property* (Official Form 106D)

Copy the total you listed
in Column A, *Amount of
claim*, at the bottom of _____

the last page of Part 1 of
Schedule D..... \$ 160,000.00

3. *Schedule E/F:*
Creditors Who Have
Unsecured Claims
 (Official Form 106E/F)

3a. Copy the total claims
 from Part 1 (priority
 unsecured claims) from
 line 6e of *Schedule*
E/F..... \$ 24,054.00

3b. Copy the total claims
 from Part 2 (nonpriority
 unsecured claims) from
 line 6j of *Schedule E/F*... \$ 0.00

Your total liabilities \$ 184,054.00

Part 3: Summarize Your Income and Expenses

4. *Schedule I: Your*
Income (Official Form
 106I)

Copy your combined
 monthly income from
 line 12 of *Schedule I*..... \$ 3,390.75

5. *Schedule J: Your*
Expenses (Official Form
 106J)

Copy your monthly
 expenses from line 22c
 of *Schedule J*..... \$ 2,916.00

**Part 4: Answer These Questions for
Administrative and Statistical Records**

6. Are you filing for bankruptcy under Chapters 7, 11, or 13?

☐ No. You have nothing to report on this part of the form. Check this box and submit this form to the court with your other schedules.

☒ Yes.

7. What kind of debt do you have?

☒ **Your debts are primarily consumer debts.**

Consumer debts are those “incurred by an individual primarily for a personal, family, or household purpose.” 11 U.S.C. § 101(8). Fill out lines 8-9g for statistical purposes. 28 U.S.C. § 159.

☐ **Your debts are not primarily consumer debts.** You have nothing to report on this part of the form. *Check this box* and submit this form to the court with your other schedules.

8. From the *Statement of Your Current Monthly Income*:

Copy your total current monthly income from Official Form 122A-1 Line 11; **OR**, Form 122B Line 11; **OR**, Form 122C-1 Line 14.

\$ 3,678.90

9. Copy the following special categories of claims from Part 4, line 6 of *Schedule E/F*:

Total claim**From Part 4 on *Schedule E/F*,
copy the following:**

9a. Domestic support obligations
(Copy line 6a.) \$ 0.00

9b. Taxes and certain other debts
you owe the government. (Copy
line 6b.) \$ 24,054.00

9c. Claims for death or personal
injury while you were
intoxicated. (Copy line 6c.) \$ 0.00

9d. Student loans. (Copy line 6f.) \$ 0.00

9e. Obligations arising out of a
separation agreement or divorce
that you did not report as priority
claims. (Copy line 6g.) \$ 0.00

9f. Debts to pension or profit-
sharing plans, and other similar
debts. (Copy line 6h.) \$ 0.00

9g. **Total.** Add lines 9a through
9f.

\$ <u>24,054.00</u>

Fill in this information to identify your case:
Debtor 1 <u>Thomas Lee Keathley, Sr.</u>
First Name Middle Name Last Name
Debtor 2 (Spouse if, filing) <u>Connie Irene Keathley</u>
First Name Middle Name Last Name
United States Bankruptcy Court for the: <u>EASTERN DISTRICT OF ARKANSAS</u>
Case Number _____ (if known)

☐ Check if this is an
amended filing

Official Form A/B

Schedule A/B: Property **12/15**

In each category, separately list and describe items. List an asset only once. If an asset fits in more than one category, list the asset in the category where you think it fits best. Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, attach a separate sheet to this form. On the top of any additional pages, write your name and case number (if known). Answer every question.

Part 1: Describe Each Residence, Building, Land, or Other Real Estate You Own or Have an Interest In

JA-86

1. Do you own or have any legal or equitable interest in any residence, building, land, or similar property?

☐ No. Got to Part 2.

☒ Yes. Where is the property?

1.1			
Street address, if available, or other description			
City	State	ZIP Code	
County			
What is the property? Check all that apply		Do not deduct secured claims or exemptions. Put the amount of any secured claims on <i>Schedule D: Creditors Who Have Claims Secured by Property</i> . Current value of the entire property?	
<input type="checkbox"/> Single-family home		\$275,000.00	
<input type="checkbox"/> Duplex or multi-unit building			
<input type="checkbox"/> Manufactured or mobile home			
<input type="checkbox"/> Land			
<input type="checkbox"/> Investment property			
<input type="checkbox"/> Timeshare		Current value of the portion you own?	
<input type="checkbox"/> Other _____		\$275,000.00	
Who has an interest in the property? Check one		Describe the nature of your ownership interest (such as fee simple, tenancy by the entirety, or a life estate), if known.	
<input type="checkbox"/> Debtor 1 only			
<input type="checkbox"/> Debtor 2 only			
<input checked="" type="checkbox"/> Debtor 1 and Debtor 2 only			

- ☐ At least one of the debtor and another Other information you wish to add about the item, such as local property identification number:
Residence .25 acre encompassing house 511 Apperson Dr. Marion, AR 72364

☐ Check if this is community property (see instructions)

If you own or have more than one, list here:

1.2

Street address, if available, or other description

City State ZIP Code

What is the property?
all that apply

☐ Single-family home
☐ Duplex or multi-unit building

Check

Do not deduct secured claims or exemptions. Put the amount of any secured claims on *Schedule D*:

<p>_____ County</p> <p><input type="checkbox"/> Manufactured or mobile home</p> <p><input type="checkbox"/> Land</p> <p><input type="checkbox"/> Investment property</p> <p><input type="checkbox"/> Timeshare</p> <p><input type="checkbox"/> Other _____</p> <p>Who has an interest in the property? Check one</p> <p><input type="checkbox"/> Debtor 1 only</p> <p><input type="checkbox"/> Debtor 2 only</p> <p><input checked="" type="checkbox"/> Debtor 1 and Debtor 2 only</p> <p><input type="checkbox"/> At least one of the debtor and another</p> <p>Other information you wish to add about the item, such as local property identification number:</p>	<p><i>Creditors Who Have Claims Secured by Property.</i></p> <p>Current value of the entire property? \$1,000.00 _____</p> <p>Current value of the portion you own? \$1,000.00 _____</p> <p>Describe the nature of your ownership interest (such as fee simple, tenancy by the entireties, or a life estate), if known. _____</p> <p><input type="checkbox"/> Check if this is community property (see instructions)</p>
--	--

.55 acre of unexempt
 urban homestead
 (restrictive covenant
 property on subdivision of
 property and dwellings)
 511 Apperson Drive
 Marion, AR.

2. Add the dollar value of the portion you own for all your entries from Part 1, including any entries for pages you have attached for Part 1. Write that number here.....=>

\$276,000.00

JA-90

Part 2: Describe Your Vehicles

Do you own, lease, or have legal or equitable interest in any vehicles, whether they are registered or not? Include any vehicles you own that someone else drives. If you lease a vehicle, also report it on *Schedule G: Executory Contracts and Unexpired Leases*.

3. Cars, vans, trucks, tractors, sport utility vehicles, motorcycles

☐ No.

■ Yes.

3.1 Make _____
Model _____
Year _____
Approximate
mileage _____
Other information:

2003 Cadillac Truck
Possession of debtor

Who has an interest in the property? Check one	Do not deduct secured claims or exemptions. Put the amount of any secured claims on <i>Schedule D</i> :
<input type="checkbox"/> Debtor 1 only	<i>Creditors Who Have Claims Secured by Property.</i>
<input type="checkbox"/> Debtor 2 only	Current value of the entire property?
<input checked="" type="checkbox"/> Debtor 1 and Debtor 2 only	\$3,500.00
<input type="checkbox"/> At least one of the debtors and another	Current value of the portion you own?
<input type="checkbox"/> Check if this is community property (see instructions)	\$3,500.00

3.2 Make _____
Model _____
Year _____

Approximate mileage _____ Other information: 1995 Cadillac Deville 155k	<input checked="" type="checkbox"/> Debtor 1 and Debtor 2 only <input type="checkbox"/> At least one of the debtors and another <input type="checkbox"/> Check if this is community property (see instructions)	<i>Creditors Who Have Claims Secured by Property.</i> Current value of the entire property? \$900.00 _____ Current value of the portion you own? \$900.00 _____
3.3 Make _____ Model _____ Year _____ Approximate mileage _____ Other information: 2011 Honda Aero	Who has an interest in the property? Check one <input type="checkbox"/> Debtor 1 only <input type="checkbox"/> Debtor 2 only <input checked="" type="checkbox"/> Debtor 1 and Debtor 2 only <input type="checkbox"/> At least one of the debtors and another	Do not deduct secured claims or exemptions. Put the amount of any secured claims on <i>Schedule D</i> : <i>Creditors Who Have Claims Secured by Property.</i> Current value of the entire property? \$1,500.00 _____

<p>3.4 Make <u>Cadillac</u> Model <u>XTS</u> Year <u>2013</u> Approximate mileage _____ Other information:</p>	<p><input type="checkbox"/> Check if this is community property (see instructions)</p> <p>Who has an interest in the property? Check one</p> <p><input type="checkbox"/> Debtor 1 only</p> <p><input type="checkbox"/> Debtor 2 only</p> <p><input checked="" type="checkbox"/> Debtor 1 and Debtor 2 only</p> <p><input type="checkbox"/> At least one of the debtors and another</p> <p><input type="checkbox"/> Check if this is community property (see instructions)</p>	<p>Current value of the portion you own? <u>\$1,500.00</u></p> <p>Do not deduct secured claims or exemptions. Put the amount of any secured claims on <i>Schedule D: Creditors Who Have Claims Secured by Property</i>.</p> <p>Current value of the entire property? <u>\$10,000.00</u></p> <p>Current value of the portion you own? <u>\$10,000.00</u></p>
---	---	--

4. Watercraft, aircraft, motor homes, ATVs and other recreational vehicles, other vehicles, and accessories

Examples: Boats, trailers, motors, personal watercraft, fishing vessels, snowmobiles, motorcycle accessories

☒ No

☐ Yes

5. Add the dollar value of the portion you own for all of your entries from Part 2, including any entries for pages you have attached for Part 2. Write that number here.....=>

\$15,900.00

Part 3: Describe Your Personal and Household Items

Do you own or have any legal or equitable interest in any of the following items?

Current value of the portion you own?

Do not deduct secured claims or exemptions.

6. Household goods and furnishings

Examples: Major appliances, furniture, linens, china, kitchenware

☐ No

☒ Yes. Describe.....

3 sets furnished bedrooms, living room
--

furniture, 2 tvs, kitchen table/chairs, refrigerator possession of debtor

\$1,500.00

7. Electronics

Examples: Televisions and radios; audio, video, stereo, and digital equipment; computers, printers, scanners; music collections; electronic devices including cell phones, cameras, media players, games

☒ No

☐ Yes. Describe.....

8. Collectibles of value

Examples: Antiques and figurines; paintings, prints, or other artwork; books, pictures, or other art objects; stamp, coin, or baseball card collections; other collections, memorabilia, collectibles

☒ No

☐ Yes. Describe.....

9. Equipment for sports and hobbies

Examples: Sports, photographic, exercise, and other hobby equipment; bicycles, pool tables, golf clubs, skis; canoes and kayaks; carpentry tools; musical instruments

☒ No

☐ Yes. Describe.....

10. Firearms

Examples: Pistols, rifles, shotguns, ammunition, and related equipment

☒ No

☐ Yes. Describe.....

11. Clothes

Examples: Everyday clothes, furs, leather coats, designer wear, shoes, accessories

☐ No

☒ Yes. Describe.....

clothes

\$50.00

12. Jewelry

Examples: Everyday jewelry, costume jewelry, engagement rings, wedding rings, heirloom jewelry, watches, gems, gold, silver

☒ No

☐ Yes. Describe.....

13. Non-farm animals

Examples: Dog, cats, birds, horses

☒ No

☐ Yes. Describe.....

14. Any other personal and household items you did not already list, including any health aids you did not list

Examples: Pistols, rifles, shotguns, ammunition, and related equipment

☒ No

☐ Yes. Give specific information.....

15. Add the dollar value of your entries from Part 3, including entries for pages you have attached for Part 3. Write the number here....

\$1,550.00

Part 4: Describe Your Financial Assets

Do you own or have any legal or equitable interest in any of the following items?

Current value of the portion you own?

Do not deduct secured claims or exemptions.

16. Cash

Examples: Money you have in your wallet, in your home, in a safe deposit box, and on hand when you file your petition

☒ No

☐ Yes.....

17. Deposits of money

Examples: Checking, savings, or other financial accounts; certificates of deposit; shares in credit unions, brokerage houses, and other similar institutions. If you have multiple accounts with the same institution, list each.

☐ No

☒ Yes..... Institution name:

17.1 checking account

**First Community
Bank**

\$400.00

18. Bonds, mutual funds, or publicly traded stocks

Examples: Bond funds, investment accounts with brokerage firms, money market accounts

☒ No

☐ Yes..... Institution or issuer name

19. Non-publicly traded stock and interests in incorporated and unincorporated businesses, including an interest in an LLC, partnership, and joint venture

☒ No

☐ Yes. Give specific information about them.....

Name of entity: % of ownership

20. Government and corporate bonds and other negotiable and non-negotiable instruments

Negotiable instruments include personal checks, cashiers' checks, promissory notes, and money orders. *Non-negotiable instruments* are those you cannot transfer to someone by signing or delivering them.

☒ No

☐ Yes. Give specific information about them

Issuer name:

21. Retirement or pension accounts

Examples: Interests in IRA, ERISA, Keogh, 401(k), 403(b), thrift savings accounts, or other pension or profit-sharing plans

☒ No

☐ Yes. List each account separately.

Type of account: Institution name:

22. Security deposits and prepayments

Your share of all unused deposits you have made so that you may continue service or use from a company

Examples: Agreements with landlords, prepaid rent, public utilities (electric, gas, water), telecommunications companies, or others

☒ No

☐ Yes. Institution name or individual:

23. Annuities (A contract for a periodic payment of money to you, either for life or for a number of years)

☒ No

☐ Yes. Issuer name and description:

24. Interests in an education IRA, in an account in a qualified ABLE program, or under a qualified state tuition program.

26 U.S.C. §§ 530(b)(1), 529A(b), and 529(b)(1).

☒ No

☐ Yes..... Institution name and description.
Separately file the records of any interests. 11 U.S.C. § 521(c):

25. Trusts, equitable or future interests in property (other than anything listed in line 1), and rights or powers exercisable for your benefit

☒ No

☐ Yes. Give specific information about them

26. Patents, copyrights, trademarks, trade secrets, and other intellectual property

Examples: Internet domain names, websites, proceeds from royalties and licensing agreements

☒ No

☐ Yes. Give specific information about them...

27. Licenses, franchises, and other general intangibles

Examples: Building permits, exclusive licenses, cooperative association holdings, liquor licenses, professional licenses

☒ No

☐ Yes. Give specific information about them...

Money or property owed to you?

Current value of the portion you own?

Do not deduct secured claims or exemptions.

28. Tax refunds owed to you

☒ No

☐ Yes. Give specific information about them, including whether you already filed the returns and the tax years.....

29. Family support

Examples: Past due or lump sum alimony, spousal support, child support, maintenance, divorce settlement, property settlement

☒ No

☐ Yes. Give specific information.....

30. Other amounts someone owes you

Examples: Unpaid wages, disability insurance payments, disability benefits, sick pay, vacation pay, workers' compensation, Social Security benefits; unpaid loans you made to someone else

☒ No

☐ Yes. Give specific information..

31. Interests in insurance policies

Examples: Health, disability, or life insurance; health savings account (HSA); credit, homeowner's, or renter's insurance

☒ No

☐ Yes. Name the insurance company of each policy and list its value.

Company name: Beneficiary: Surrender or
refund value:

32. Any interest in property that is due you from someone who has died

If you are the beneficiary of a living trust, expect proceeds from a life insurance policy, or are currently entitled to receive property because someone has died

☒ No

☐ Yes. Give specific information..

33. Claims against third parties, whether or not you have filed a lawsuit or made a demand for payment

Examples: Accidents, employment disputes, insurance claims, or rights to sue

☒ No

☐ Yes. Describe each claim.....

34. Other contingent and unliquidated claims of every nature, including counterclaims of the debtor and rights to set off claims

☒ No

☐ Yes. Describe each claim.....

35. Any financial assets you did not already list

☒ No

☐ Yes. Give specific information..

36. Add the dollar value of all of your entries from Part 4, including any entries for pages you have attached for Part 4. Write that number here..... **\$400.00**

Part 5: Describe Any Business-Related Property You Own or Have an Interest In. List any real estate in Part 1.

37. Do you own or have any legal or equitable interest in any business-related property?

☒ No. Go to Part 6.

☐ Yes. Go to line 38.

Part 6: Describe Any Farm- and Commercial Fishing-Related Property You Own or Have an Interest In.

If you own or have an interest in farmland, list it in Part 1.

46. Do you own or have any legal or equitable interest in any farm- or commercial fishing-related property?

☒ No. Go to Part 7.

☐ Yes. Go to line 47.

Part 7: Describe All Property You Own or Have an Interest in That You Did Not List Above

53. Do you have other property of any kind you did not already list?

☐ No

☒ Yes. Give specific information.....

lawn mower	
possession of debtor	<u>\$50.00</u>
riding mower	<u>\$250.00</u>

Part 8: List the Totals of Each Part of this Form

55. Part 1: Total real estate, line 2..... \$276,000.00

56. Part 2: Total vehicle, line 5 \$15,900.00

**57. Part 3: Total personal and household items,
line 15** \$1,550.00

58. Part 4: Total financial assets, line 36
\$400.00

**59. Part 5: Total business-related property, line
45** \$0.00

**60. Part 6: Total farm- and fishing-related
property, line 52** \$0.00

**61. Part 7: Total other property not listed, line
54** + \$300.00

**62. Total personal property. Add lines 56
through 61...** \$18,150.00

Copy personal property total \$18,150.00

**63. Total of all property on Schedule A/B. Add
line 55 + line 62** \$294,150.00

Fill in this information to identify your case:
Debtor 1 <u>Thomas Lee Keathley, Sr.</u>
First Name Middle Name Last Name
Debtor 2 (Spouse if, filing) <u>Connie Irene Keathley</u>
First Name Middle Name Last Name
United States Bankruptcy Court for the: <u>EASTERN DISTRICT OF ARKANSAS</u>
Case Number _____ (if known)

☐ Check if this is an amended filing

Official Form 106C

Schedule C: The Property You Claim as Exempt

4/19

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. Using the property you listed on *Schedule A/B: Property* (Official Form 106A/B) as your source, list the property that you claim as exempt. If more space is needed, fill out and attach to this page as many copies of *Part 2: Additional Page* as necessary. On the top of any additional pages, write your name and case number (if known).

For each item of property you claim as exempt, you must specify the amount of the exemption you claim. One way of doing so is to state a specific dollar amount as exempt.

Alternatively, you may claim the full fair market value of the property being exempted up to the amount of any applicable statutory limit. Some exemptions—such as those for health aids, rights to receive certain benefits, and tax-exempt retirement funds—may be unlimited in dollar amount. However, if you claim an exemption of 100% of fair market value under a law that limits the exemption to a particular dollar amount and the value of the property is determined to exceed that amount, your exemption would be limited to the applicable statutory amount.

Part 1: Identify the Property You Claim as Exempt

1. Which set of exemptions are you claiming?
Check one only, even if your spouse is filing with you.

- ☒ You are claiming state and federal nonbankruptcy exemptions. 11 U.S.C. § 522(b)(3)
- ☐ You are claiming federal exemptions. 11 U.S.C. § 522(b)(2)

2. For any property you list on *Schedule A/B* that you claim as exempt, fill in the information below.

Brief description of the property and line on <i>Schedule A/B</i> that lists this property	Current value of the portion you own Copy the value from <i>Schedule A/B</i>	Amount of the exemption you claim <i>Check only one box for each exemption</i>	Specific laws that allow exemption
Residence .25 acre encompassing house 511 Apperson Dr. Marion, AR 72364 Line from <i>Schedule A/B</i> : 1.1	<u>\$275,000.00</u>	<input checked="" type="checkbox"/> <u>\$92,000.00</u> <input type="checkbox"/> 100% of fair market value, up to any applicable statutory limit	Ark. Const. Art. 9 §§ 3 and 5
2003 Cadillac Truck Possession of debtor	<u>\$3,500.00</u>	<input checked="" type="checkbox"/> <u>\$400.00</u> <input type="checkbox"/> 100% of fair market value, up to any	Ark. Const. Art. 9 § 1

Line from <i>Schedule A/B</i> : 3.1		applicable statutory limit	
3 sets furnished bedrooms, living room furniture, 2 tvs, kitchen table/chairs, refrigerator possession of debtor Line from <i>Schedule A/B</i> : 6.1	<u>\$1,500.00</u>	<input checked="" type="checkbox"/> <u>\$750.00</u> <input type="checkbox"/> 100% of fair market value, up to any applicable statutory limit	Ark. Const. Art. 9 § 2
clothes Line from <i>Schedule A/B</i> : 11.1	<u>\$50.00</u>	<input checked="" type="checkbox"/> <u>\$50.00</u> <input type="checkbox"/> 100% of fair market value, up to any applicable statutory limit	Ark. Const. Art. 9 § 2

lawn mower possession of debtor Line from <i>Schedule</i> <i>A/B</i> : 53.1	<u> \$50.00 </u>	<input checked="" type="checkbox"/> <u> \$100.00 </u> <input type="checkbox"/> 100% of fair market value, up to any applicable statutory limit	Ark. Const. Art. 9 § 2
riding mower Line from <i>Schedule</i> <i>A/B</i> : 53.2	<u> \$250.00 </u>	<input checked="" type="checkbox"/> <u> \$150.00 </u> <input type="checkbox"/> 100% of fair market value, up to any applicable statutory limit	Ark. Const. Art. 9 § 2

3. Are you claiming a homestead exemption of more than \$170,350?

(Subject to adjustment on 4/01/22 and every 3 years after that for cases filed on or after the date of adjustment.)

☒ No

☐ Yes. Did you acquire the property covered by the exemption within 1,215 days before you filed this case?

☐ No

☐ Yes

Fill in this information to identify your case:		
Debtor 1		
<u>Thomas Lee Keathley, Sr.</u>		
First Name	Middle Name	Last Name
Debtor 2		
(Spouse if, filing)		
<u>Connie Irene Keathley</u>		
First Name	Middle Name	Last Name
United States Bankruptcy Court for the:		
<u>EASTERN DISTRICT OF ARKANSAS</u>		
Case Number _____		
(if known)		

☐ Check if this is an amended filing

Official Form 106D

Schedule D: Creditors Who Have Claims Secured by Property **12/15**

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, copy the Additional Page, fill it out, number the entries, and attach it to this form. On the top of any additional pages, write your name and case number (if known).

1. Do any creditors have claims secured by your property?

☐ No. Check this box and submit this form to the court with your other schedules. You have nothing else to report on this form.

☒ Yes. Fill in all the information below.

Part 1: List All Secured Claims			
2. List all secured claims. If a creditor has more than one secured claim, list the creditor separately for each claim. If more than one creditor has a particular claim, list the other creditors in Part 2. As much as possible, list the claims in alphabetical order according to the creditor's name.			
	Column A	Column B	Column C
	Amount of claim	Value of collateral that supports this claim	Unsecured portion If any
2.1 Rushmore Loan Management Svcs	Do not deduct the value of collateral.		
Creditor's Name	\$160,000.00	\$275,000.00	\$0.00
Describe the property that secures the claim:			
Residence .25 acre encompassing house 511 Apperson Dr. Marion, AR 72364			

<p>PO Box 814529 Peoria, AZ 85381 Number, Street, City, State & Zip Code</p>	<p>As of the date you file, the claim is: Check all that apply.</p> <p><input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed</p> <p>Nature of Lien. Check all that apply</p> <p><input type="checkbox"/> An agreement you made (such as mortgage or secured car loan) <input type="checkbox"/> Statutory lien (such as tax lien, mechanic's lien) <input type="checkbox"/> Judgment lien from a lawsuit <input checked="" type="checkbox"/> Other (including a right to offset) _____</p> <p style="text-align: right;">Last 4 digits of account number _____</p>
<p>Who owes the debt? Check one.</p> <p><input type="checkbox"/> Debtor 1 only <input type="checkbox"/> Debtor 2 only <input checked="" type="checkbox"/> Debtor 1 and Debtor 2 only</p> <p><input type="checkbox"/> At least one of the debtors and another</p> <p><input type="checkbox"/> Check if this claim relates to a community debt</p> <p>Date debt was incurred _____</p>	

\$160,000.00
\$160,000.00

Add the dollar value of your entries in Column A on this page. Write that number here:

If this is the last page of your form, add the dollar value totals from all pages. Write that number here:

Part 2: List All Others to Be Notified for a Debt That You Already Listed

Use this page only if you have others to be notified about your bankruptcy for a debt that you already listed in Part 1. For example, if a collection agency is trying to collect from you for a debt you owe to someone else, list the creditor in Part 1, and then list the collection agency here. Similarly, if you have more than one creditor for any of the debts that you listed in Part 1, list the additional creditors here. If you do not have additional persons to be notified for any debts in Part 1, do not fill out or submit this page.

Fill in this information to identify your case:
Debtor 1 <u>Thomas Lee Keathley, Sr.</u>
First Name Middle Name Last Name
Debtor 2 (Spouse if, filing) <u>Connie Irene Keathley</u>
First Name Middle Name Last Name
United States Bankruptcy Court for the: <u>EASTERN DISTRICT OF ARKANSAS</u>
Case Number _____ (if known)

☐ Check if this is an amended filing

Official Form 106E/F

Schedule E/F: Creditors Who Have Unsecured Claims **12/15**

Be as complete and accurate as possible. Use Part 1 for creditors with PRIORITY claims and Part 2 for creditors with NONPRIORITY claims. List the other party to any executory contracts or unexpired leases that could result in a claim. Also list executory contracts on Schedule A/B: Property (Official Form 106A/B) and on Schedule G: Executory Contracts and Unexpired Leases (Official Form 106G). Do not include any creditors with partially secured claims that are listed in Schedule D: Creditors Who Have Claims Secured by Property. If more space is needed, copy the Part you need, fill it out, number the entries in the boxes on the left. Attach the Continuation Page to this page. If you have no information to report in a Part, do not file that Part. On the top of any

additional pages, write your name and case number (if known).

Part 1: List All Your PRIORITY Unsecured Claims

1. Do any creditors have priority unsecured claims against you?

☐ No. Go to Part 2.

☒ Yes.

2. List all of your priority unsecured claims. If a creditor has more than one priority unsecured claim, list the creditor separately for each claim. For each claim listed, identify what type of claim it is. If a claim has both priority and nonpriority amounts, list that claim here and show both priority and nonpriority amounts. As much as possible, list the claims in alphabetical order according to the creditor's name. If you have more than two priority unsecured claims, fill out the Continuation Page of Part 1. If more than one creditor holds a particular claim, list the other creditors in Part 3.

(For an explanation of each type of claim, see the instructions for this form in the instruction booklet.)

2.1 Dept. Finance & Administration

Priority Creditor's Name

P.O. Box 8090

Little Rock, AR

72203

Number Street City State

Zip Code

Last 4 digits of account number

When was the debt incurred?

Total claim

Priority amount

Nonpriority amount

\$15,500.00

\$10,000.00

\$5,500.00

Who incurred the debt? Check one.

☐ Debtor 1 only

☐ Debtor 2 only

☒ Debtor 1 and Debtor 2 only

As of the date you file, the claim is: Check all that apply.

☐ Contingent

☐ Unliquidated

☐ Disputed

Type of PRIORITY unsecured claim:

☐ Domestic support obligations

☐ At least one of the debtors and another

☐ **Check if this claim is for a community debt**

Is the claim subject to offset?

☒ No

☐ Yes

☒ Taxes and certain other debts you owe the government

☐ Claims for death or personal injury while you were intoxicated

☐ Other. Specify _____

Taxes

2.2 Internal Revenue Service	Last 4 digits of account number	\$8,554.00	\$7,619.00	\$935.00
------------------------------	---------------------------------	------------	------------	----------

Priority Creditor's Name

Department of Treasury

P. O. Box 7346

Philadelphia, PA 19101-7346

When was the debt incurred? _____

Number Street City State
Zip Code

Who incurred the debt?

Check one.

- ☐ Debtor 1 only
☐ Debtor 2 only

☒ Debtor 1 and Debtor 2 only

☐ At least one of the debtors and another

☐ **Check if this claim is for a community debt**

Is the claim subject to offset?

- ☒ No
☐ Yes

As of the date you file, the claim is: Check all that apply.

- ☐ Contingent
☐ Unliquidated
☐ Disputed

Type of PRIORITY unsecured claim:

☐ Domestic support obligations

☒ Taxes and certain other debts you owe the government

☐ Claims for death or personal injury while you were intoxicated

☐ Other. Specify _____

Taxes

**Part 2: List All of Your NONPRIORITY
Unsecured Claims**

3. Do any creditors have nonpriority unsecured claims against you?

- ☒ No. You have nothing to report in this part.
Submit this form to the court with your other
schedules.
- ☐ Yes.

**Part 3: List Others to Be Notified About a Debt
That You Already Listed**

5. Use this page only if you have others to be notified about your bankruptcy, for a debt that you already listed in Parts 1 or 2. For example, if a collection agency is trying to collect from you for a debt you owe to someone else, list the original creditor in Parts 1 or 2, then list the collection agency here. Similarly, if you have more than one creditor for any of the debts that you listed in Parts 1 or 2, list the additional creditors here. If you do not have additional persons to be notified for any debts in Parts 1 or 2, do not fill out or submit this page.

**Part 4: Add the Amounts for Each Type of
Unsecured Claim**

6. Total the amounts of certain types of unsecured claims. This information is for statistical reporting purposes only. 28 U.S.C. §159. Add the amounts for each type of unsecured claim.

		Total claim
Total claims from Part 1	6a. Domestic support obligations	6a. <u>\$0.00</u>
	6b. Taxes and certain other debts you owe the government	6b. <u>\$24,054.00</u>
	6c. Claims for death or personal injury while you were intoxicated	6c. <u>\$0.00</u>
	6d. Other. Add all other priority unsecured claims. Write that amount here.	6d. <u>\$0.00</u>
	6e. Total Priority. Add lines 6a through 6d.	6e. <u>\$24,054.00</u>
		Total claim
Total claims from Part 2	6f. Student loans	6f. <u>\$0.00</u>
	6g. Obligations arising out of a separation agreement or divorce that you	6g. <u>\$0.00</u>

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**did not report
as priority.**

**6h. Debts to pension or
profit-sharing
plans, and other
similar debts** 6h. \$0.00

6i. Other. Add all other nonpriority
unsecured claims.
Write that amount
here. 6i. \$0.00

**6j. Total
Nonpriority.** 6j. \$0.00
Add lines 6f
through 6i.

Fill in this information to identify your case:
Debtor 1 <u>Thomas Lee Keathley, Sr.</u>
First Name Middle Name Last Name
Debtor 2 (Spouse if, filing) <u>Connie Irene Keathley</u>
First Name Middle Name Last Name
United States Bankruptcy Court for the: <u>EASTERN DISTRICT OF ARKANSAS</u>
Case Number _____ (if known)

☐ Check if this is an amended filing

Official Form 106G

**Schedule G: Executory Contracts and
Unexpired Lease 12/15**

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, copy the additional page, fill it out, number the entries, and attach it to this page. On the top of any additional pages, write your name and case number (if known).

1. Do you have any executory contracts or unexpired leases?

☐ No. Check this box and file this form with the court with your other schedules. You have nothing else to report on this form.

■ Yes. Fill in all of the information below even if the contacts of leases are listed on *Schedule A/B: Property* (Official Form 106 A/B).

2. List separately each person or company with whom you have the contract or lease. Then state what each contract or lease is for (for example, rent, vehicle lease, cell phone). See the instructions for this form in the instruction booklet for more examples of executory contracts and unexpired leases.

Person or company with whom you have the contract or lease	State what the contract or lease is for
Name, Number, Street, City, State and ZIP Code	
2.1 Aaron's Rental 1800 N. Missouri, Suite 3 West Memphis, AR 72301	Washer/dryer Rent to own

Fill in this information to identify your case:
Debtor 1 <u>Thomas Lee Keathley, Sr.</u>
First Name Middle Name Last Name
Debtor 2 (Spouse if, filing) <u>Connie Irene Keathley</u>
First Name Middle Name Last Name
United States Bankruptcy Court for the: <u>EASTERN DISTRICT OF ARKANSAS</u>
Case Number _____ (if known)

☐ Check if this is an amended filing

Official Form 106H

Schedule H: Your Codebtors

12/15

Codebtors are people or entities who are also liable for any debts you may have. Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, copy the Additional Page, fill it out, and number the entries in the boxes on the left. Attach the Additional Page to this page. On the top of any Additional Pages, write your name and case number (if known). Answer every question.

1. Do you have any codebtors? (If you are filing a joint case, do not list either spouse as a codebtor.)

☒ No

☐ Yes

2. Within the last 8 years, have you lived in a community property state or territory?

(Community property states and territories include Arizona, California, Idaho, Louisiana, Nevada, New Mexico, Puerto Rico, Texas, Washington, and Wisconsin.)

☒ No. Go to line 3

☐ Yes. Did your spouse, former spouse, or legal equivalent live with you at the time?

3. In Column 1, list all of your codebtors. Do not include your spouse as a codebtor if your spouse is filing with you. List the person shown in line 2 again as a codebtor only if that person is a guarantor or cosigner. Make sure you have listed the creditor on Schedule D (Official Form 106D), Schedule E/F (Official Form 106E/F), or Schedule G (Official Form 106G). Use Schedule D, Schedule E/F, or Schedule G to fill out Column 2.

* * *

Fill in this information to identify your case:
Debtor 1 <u>Thomas Lee Keathley, Sr.</u>
First Name Middle Name Last Name
Debtor 2 (Spouse if, filing) <u>Connie Irene Keathley</u>
First Name Middle Name Last Name
United States Bankruptcy Court for the: <u>EASTERN DISTRICT OF ARKANSAS</u>
Case Number _____ (if known)

Check if this is:

- ☐ An amended filing
- ☐ A supplement showing
postpetition chapter 13
expenses as of the
following date:

MM / DD / YYYY

Official Form 106I**Schedule I: Your Income****12/15**

Be as complete and accurate as possible. If two married people are filing together (Debtor 1 and Debtor 2), both are equally responsible for supplying correct information. If you are married and not filing jointly, and your spouse is living with you, include information about your spouse. If you are separated and your spouse is not filing with you, do not include

information about your spouse. If more space is needed, attach a separate sheet to this form. On the top of any additional pages, write your name and case number (if known). Answer every question.

Part 1: Describe Employment

**1. Fill in
your
employment
information.**

Debtor 1

Debtor 2

If you have more than one job, attach a separate page with information about additional employers.

Employ-
ment
status

☒ Employ-
ed
☐ Not
employed

☒ Employ-
ed
☐ Not
employed

Occupation

Include part-time, seasonal, or self-employed work.

Employer's name

J.B. Hunt

Occupation may include student or homemaker, if it applies.

Employer's
address

615 J.B.
Hunt Cor-
porate Dr.
Lowell,
AR 72745

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How long 1 year _____
employ-
ed there?

Part 2: Give Details About Monthly Income

Estimate monthly income as of the date you file this form. If you have nothing to report for any line, write \$0 in the space. Include your non-filing spouse unless you are separated.

If you or your non-filing spouse have more than one employer, combine the information for all employers for that person on the lines below. If you need more space, attach a separate sheet to this form.

For Debtor 1	For Debtor 2 or non-filing spouse
--------------	---

2. List monthly gross wages, salary, and commissions (before all payroll deductions). If not paid monthly, calculate what the monthly wage would be.

2. \$ <u>3,678.90</u>	\$ <u>0.00</u>
-----------------------	----------------

3. Estimate and list monthly overtime pay.

3. +\$ <u>0.00</u>	+\$ <u>0.00</u>
--------------------	-----------------

4. Calculate gross Income. Add line 2 + line 3.

4. \$ <u>3,678.90</u>	\$ <u>0.00</u>
-----------------------	----------------

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For Debtor 1

For Debtor 2
or non-filing
spouse

Copy line 4 here

4. \$ 3,678.90 \$ 0.00

5. List all payroll deductions

**5a. Tax, Medicare, and Social Security
deductions**

5a. \$ 736.71 \$ 0.00

**5b. Mandatory contributions for retirement
plans**

5b. \$ 0.00 \$ 0.00

**5c. Voluntary contributions for retirement
plans**

5c. \$ 0.00 \$ 0.00

**5d. Required repayments of retirement fund
loans**

5d. \$ 0.00 \$ 0.00

5e. Insurance

5e. \$ 328.44 \$ 0.00

5f. Domestic support obligations

5f. \$ 0.00 \$ 0.00

5g. Union dues

5g. \$ 0.00 \$ 0.00

5h. Other deductions. Specify _____

5h.+ \$ 0.00 \$ 0.00

6. Add the payroll deductions. Add lines
5a+5b+5c+5d+5e+5f+5g+5h.

6. \$ 1,065.15 \$ 0.00

7. Calculate total monthly take-home pay.
Subtract line 6 from line 4.

7. \$ 2,613.75 \$ 0.00

8. List all other income regularly received:

**8a. Net income from rental property and
from operating a business, profession, or
farm**

Attach a statement for each property and business
showing gross receipts, ordinary and necessary
business expenses, and the total monthly net
income.

8a. \$ 0.00 \$ 0.00

8b. Interest and dividends

8b. \$ 0.00 \$ 0.00

**8c. Family support payments that you, a non-
filing spouse, or a dependent regularly
receive**

Include alimony, spousal support, child support,
maintenance, divorce settlement, and property
settlement.

8c. \$ 0.00 \$ 0.00

8d. Unemployment compensation

8d. \$ 0.00 \$ 0.00

8e. Social Security

8e. \$ 0.00 \$ 777.00

8f. Other government assistance that you regularly receive

Include cash assistance and the value (if known) of any non-cash assistance that you receive, such as food stamps (benefits under the Supplemental Nutrition Assistance Program) or housing subsidies.

Specify: _____

8f. \$ 0.00 \$ 0.00

8g. Pension or retirement income

8g. \$ 0.00 \$ 0.00

8h. Other monthly income. Specify: _____

8h.+ \$ 0.00 + \$ 0.00

9. All other monthly income. Add lines 8a+8b+8c+8d+8e+8f+8g+8h.

9. \$ 0.00 \$ 777.00

10. Calculate monthly income. Add line 7 + line 9.

Add the entries in line 10 for Debtor 1 and Debtor 2 or non-filing spouse.

10. \$ 2,613.75 + \$ 777.00 = \$ 3,390.75

11. State all other regular contributions to the expenses that you list in *Schedule J*.

Include contributions from an unmarried partner, members of your household, your dependents, your roommates, and other friends or relatives.

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Do not include any amounts already included in lines 2-10 or amounts that are not available to pay expenses listed in *Schedule J*.

Specify: _____

11. +\$ 0.00

12. Add the amount in the last column of line 10 to the amount in line 11. The result is the combined monthly income. Write that amount on the *Summary of Schedules and Statistical Summary of Certain Liabilities and Related Data*, if it applies.

12. \$ 3,390.75

**Combined
monthly
income**

13. Do you expect an increase or decrease within the year after you file this form?

☒ No.

☐ Yes. Explain:

Fill in this information to identify your case:		
Debtor 1		
<u>Thomas Lee Keathley, Sr.</u>		
First Name	Middle Name	Last Name
Debtor 2		
(Spouse if, filing)		
<u>Connie Irene Keathley</u>		
First Name	Middle Name	Last Name
United States Bankruptcy Court for the:		
<u>EASTERN DISTRICT OF ARKANSAS</u>		
Case Number _____		
(if known)		

Check if this is:

- ☐ An amended filing
- ☐ A supplement showing
postpetition chapter 13
expenses as of the
following date:

MM / DD / YYYY

Official Form 106J

Schedule J: Your Expenses

12/15

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, attach a separate sheet to this form. On the top of any additional pages, write your name and case number (if known). Answer every question.

Part 1: Describe Your Household

1. Is this a joint case?

☐ No. Go to line 2.

■ Yes. Does Debtor 2 live in a separate household?

■ No

☐ Yes. Debtor must file Official Form 106J-2, *Expenses for Separate Household* of Debtor 2.

2. Do you have dependents? ■ No.

Do not state the dependents names.

Fill out this information for each dependent.....

Do not list Debtor 1 and

Debtor 2

☐ Yes.

Dependent's relationship to Debtor 1 or Debtor 2	Dependent's age	Does dependent live with you?
---	--------------------	-------------------------------------

☐ No

☐ Yes

* * *

3. Do your expenses include ■ No.

expenses of people other ☐ Yes.

**than yourself and your
dependents?**

Part 2: Estimate Your Ongoing Monthly Expenses

Estimate your expenses as of your bankruptcy filing date unless you are using this form as a

supplement in a Chapter 13 case to report expenses as of a date after the bankruptcy is filed. If this is a supplemental *Schedule J*, check the box at the top of the form and fill in the applicable date.

Include expenses paid for with non-cash government assistance if you know the value of such assistance and have included it on

Schedule I: Your Income
(Official Form 106I.)

Your expenses

4. The rental or home ownership expenses for your residence. Include first mortgage payments and any rent for the ground or lot.

4. \$ 1,280.00

If not included in line 4:

4a. Real estate taxes

4a. \$ 0.00

4b. Property, homeowner's, or renter's insurance

4b. \$ 0.00

4c. Home maintenance, repair, and upkeep expenses

4c. \$ 0.00

4d. Homeowner's association or condominium dues

4d. \$ 0.00

5. Additional mortgage payments for your residence, such as home equity loans

5. \$ 0.00

6. Utilities:

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6a. Electricity, heat, natural gas	6a. \$ <u>275.00</u>
6b. Water, sewer, garbage collection	6b. \$ <u>43.00</u>
6c. Telephone, cell phone, Internet, satellite, and cable services	6c. \$ <u>108.00</u>
6d. Other. Specify: <u>Cable</u>	6d. \$ <u>105.00</u>
7. Food and housekeeping supplies	7. \$ <u>400.00</u>
8. Childcare and children's education costs	8. \$ <u>0.00</u>
9. Clothing, laundry, and dry cleaning	9. \$ <u>50.00</u>
10. Personal care products and services	10. \$ <u>50.00</u>
11. Medical and dental expenses	11. \$ <u>75.00</u>
12. Transportation. Include gas, maintenance, bus or train fare. Do not include car payments.	12. \$ <u>200.00</u>
13. Entertainment, clubs, recreation, newspapers, magazines, and books	13. \$ <u>50.00</u>
14. Charitable contributions and religious donations	14. \$ <u>0.00</u>
15. Insurance	

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Do not include insurance
deducted from your pay or
included in lines 4 or 20.

15a. Life insurance 15a. \$ 0.00

15b. Health insurance 15b. \$ 0.00

15c. Vehicle insurance 15c. \$ 240.00

15d. Other insurance.
Specify: _____ 15d. \$ 0.00

16. **Taxes.** Do not include
taxes deducted from your pay
or included in lines 4 or 20.

Specify: Personal Property 16. \$ 40.00

17. **Installment or lease
payments:**

17a. Car payments for Vehicle
1 17a. \$ 0.00

17b. Car payments for Vehicle
2 17b. \$ 0.00

17c. Other. Specify: _____ 17c. \$ 0.00

17d. Other. Specify: _____ 17d. \$ 0.00

18. **Your payments of
alimony, maintenance, and
support that you did not
report as deducted from
your pay on line 5, *Schedule
I, Your Income* (Official
Form 106I).**

18. \$ 0.00

19. **Other payments you
make to support others who
do not live with you.**

\$ 0.00

Specify: _____ 19.

20. Other real property expenses not included in lines 4 or 5 of this form or on Schedule I: Your Income.

20a. Mortgages on other property 20a. \$ 0.00

20b. Real estate taxes 20b. \$ 0.00

20c. Property, homeowner's, or renter's insurance 20c. \$ 0.00

20d. Maintenance, repair, and upkeep expenses 20d. \$ 0.00

20e. Homeowner's association or condominium dues 20d. \$ 0.00

21. Other. Specify: _____ 21. +\$ 0.00

22. Calculate your monthly expenses

22a. Add lines 4 through 21. \$ 2,916.00

22b. Copy line 22 (monthly expenses for Debtor 2), if any, from Official Form 106J-2 \$ _____

22c. Add line 22a and 22b. The result is your monthly expenses. \$ 2,916.00

23. Calculate your monthly net income

23a. Copy line 12 (*your combined monthly income*) from Schedule I. 23a. \$ 3,390.00

23b. Copy your monthly expenses from line 22c above 23b. -\$ 2,916.00

23c. Subtract your monthly expenses from your monthly income. The result is your *monthly net income*.

23c. \$ 474.75

24. Do you expect an increase or decrease in your expenses within the year after you file this form? For example, do you expect to finish paying for your car loan within the year or do you expect your mortgage payment to increase or decrease because of a modification to the terms of your mortgage?

☒ No.

☐ Yes. Explain here:

Fill in this information to identify your case:
Debtor 1 <u>Thomas Lee Keathley, Sr.</u>
First Name Middle Name Last Name
Debtor 2 (Spouse if, filing) <u>Connie Irene Keathley</u>
First Name Middle Name Last Name
United States Bankruptcy Court for the: <u>EASTERN DISTRICT OF ARKANSAS</u>
Case Number _____ (if known)

☐ Check if this is an
amended filing

Official Form 106Dec

**Declaration About an Individual's Debtor's
Schedules** **12/15**

If two married people are filing together, both are equally responsible for supplying correct information.

You must file this form whenever you file bankruptcy schedules or amended schedules. Making a false statement, concealing property, or obtaining money or property by fraud in connection with a bankruptcy case can result in fines up to \$250,000, or imprisonment for up to 20 years, or both. 18 U.S.C. §§ 152, 1341, 1519, and 3571.

Sign Below _____

Did you pay or agree to pay someone who is NOT an attorney to help you fill out bankruptcy forms?

☒ No

☐ Yes. Name of person _____ *Attach Bankruptcy Petition Preparer's Notice, Declaration, and Signature (Official Form 119)*

Under penalty of perjury, I declare that I have read the summary and schedules filed with this declaration and that they are true and correct.

x /s/ Thomas Lee Keathley, Sr.

Thomas Lee Keathley, Sr.

Signature of Debtor 1

Date **December 27, 2019**

x /s/ Connie Irene Keathley

Connie Irene Keathley

Signature of Debtor 2

Date **December 27, 2019**

Fill in this information to identify your case:
Debtor 1 <u>Thomas Lee Keathley, Sr.</u>
First Name Middle Name Last Name
Debtor 2 (Spouse if, filing) <u>Connie Irene Keathley</u>
First Name Middle Name Last Name
United States Bankruptcy Court for the: <u>EASTERN DISTRICT OF ARKANSAS</u>
Case Number _____ (if known)

☐ Check if this is an
amended filing

Official Form 107

Statement of Financial Affairs for Individuals
Filing for Bankruptcy **12/15**

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information.

Part 1: Give Details About Your Marital Status and Where You Lived Before

1. What is your current marital status?

- ☒ Married
☐ Not married

2. During the last 3 years, have you lived anywhere other than where you live now?

- ☒ No

☐ Yes. List all of the places you lived in the last 3 years. Do not include where you live now.

* * *

3. Within the last 8 years, did you ever live with a spouse or legal equivalent in a community property state or territory? (*Community property states and territories* include Arizona, California, Idaho, Louisiana, Nevada, New Mexico, Puerto Rico, Texas, Washington and Wisconsin.)

☒ No.

☐ Yes. Make sure you fill out *Schedule H: Your Codebtors* (Official Form 106H).

Part 2: Explain the Sources of Your Income

4. Did you have any income from employment or from operating a business during this year or the two previous calendar years?

Fill in the total amount of income you received from all jobs and all businesses, including part-time activities.

If you are filing a joint case and you have income that you receive together, list it only once under Debtor 1.

☐ No

☒ Yes. Fill in the details.

From January 1 of current year until the date you filed for bankruptcy:

Debtor 1

**Sources
of income**

Check all
that apply.

**Gross
income**

(before
deductions
and

Debtor 2

**Sources
of income**

Check all
that apply.

**Gross
income**

(before
deductions

	exclu- sions)		and exclu- sions)
<input checked="" type="checkbox"/> Wages, commis- sions, bonuses, tips	\$49,520.00	<input type="checkbox"/> Wages, commis- sions, bonuses, tips	\$0.00
<input type="checkbox"/> Opera- ting a business		<input type="checkbox"/> Opera- ting a business	

**For last calendar year: (January 1 to
December 31, 2018)**

Debtor 1		Debtor 2	
Sources of income Check all that apply.	Gross income (before deductions and exclu- sions)	Sources of income Check all that apply.	Gross income (before deductions and exclu- sions)
<input checked="" type="checkbox"/> Wages, commis- sions, bonuses, tips	\$68,701.00	<input type="checkbox"/> Wages, commis- sions, bonuses, tips	\$0.00
<input type="checkbox"/> Opera- ting a business		<input type="checkbox"/> Opera- ting a business	

For last calendar year: (January 1 to December 31, 2017)

Debtor 1		Debtor 2	
Sources of income	Gross income	Sources of income	Gross income
Check all that apply.	(before deductions and exclusions)	Check all that apply.	(before deductions and exclusions)
<input checked="" type="checkbox"/> Wages, commissions, bonuses, tips	\$103,983.00	<input type="checkbox"/> Wages, commissions, bonuses, tips	\$0.00
<input type="checkbox"/> Operating a business		<input type="checkbox"/> Operating a business	

5. Did you receive any other income during this year or the two previous calendar years?

Include income regardless of whether that income is taxable. Examples of *other income* are alimony; child support; Social Security, unemployment, and other public benefit payments; pensions; rental income; interest; dividends; money collected from lawsuits; royalties; and gambling and lottery winnings. If you are filing a joint case and you have income that you received together, list it only once under Debtor 1.

List each source and the gross income from each source separately. Do not include income that you listed in line 4.

☐ No

☒ Yes. Fill in the details.

**From January 1 of current year until the date
you filed for bankruptcy:**

Debtor 1		Debtor 2	
Sources of income Describe below.	Gross income (before deductions and exclu- sions)	Sources of income Check all that apply.	Gross income (before deductions and exclu- sions)
Social Security	\$10,644.00		

**For last calendar year:
(January 1 to December 31, 2018)**

Debtor 1		Debtor 2	
Sources of income Describe below.	Gross income (before deductions and exclu- sions)	Sources of income Check all that apply.	Gross income (before deductions and exclu- sions)
Social Security	\$10,644.00		

**For last calendar year before that:
(January 1 to December 31, 2017)**

Debtor 1		Debtor 2	
Sources of income	Gross income	Sources of income	Gross income
Describe below.	(before deductions and exclusions)	Check all that apply.	(before deductions and exclusions)
Social Security	\$10,440.00		

Part 3: List Certain Payments You Made Before You Filed for Bankruptcy

6. Are either Debtor 1's or Debtor 2's debts primarily consumer debts?

- ☐ No. Neither Debtor 1 nor Debtor 2 has primarily consumer debts. *Consumer debts* are defined in 11 U.S.C. § 101(8) as "incurred by an individual primarily for a personal, family, or household purpose."

During the 90 days before you filed for bankruptcy, did you pay any creditor a total of \$6,825* or more?

- ☐ No. Go to line 7.
- ☐ Yes List below each creditor to whom you paid a total of \$6,825* or more in one or more payments and the total amount you paid that creditor. Do not include payments for domestic support obligations, such as child support and alimony. Also, do not include

payments to an attorney for this bankruptcy case.

* Subject to adjustment on 4/01/22 and every 3 years after that for cases filed on or after the date of adjustment.

■ **Yes. Debtor 1 or Debtor 2 or both have primarily consumer debts.**

During the 90 days before you filed for bankruptcy, did you pay any creditor a total of \$600 or more?

■ No. Go to line 7.

☐ Yes List below each creditor to whom you paid a total of \$600 or more and the total amount you paid that creditor. Do not include payments for domestic support obligations, such as child support and alimony. Also, do not include payments to an attorney for this bankruptcy case.

* * *

7. Within 1 year before you filed for bankruptcy, did you make a payment on a debt you owed anyone who was an insider?

Insiders include your relatives; any general partners; relatives of any general partners; partnerships of which you are a general partner; corporations of which you are an officer, director, person in control, or owner of 20% or more of their voting securities; and any managing agent, including one for a business you operate as a sole proprietor. 11 U.S.C. § 101. Include payments for domestic support obligations, such as child support and alimony.

■ No.

☐ Yes List all payments to an insider

* * *

8. Within 1 year before you filed for bankruptcy, did you make any payments or transfer any property on account of a debt that benefited an insider?

Include payment on debts guaranteed or cosigned by an insider.

☒ No.

☐ Yes List all payments to an insider

* * *

Part 4: Identify Legal Actions, Repossessions, and Foreclosures

9. Within 1 year before you filed for bankruptcy, were you a party in any lawsuit, court action, or administrative proceeding?

List all such matters, including personal injury cases, small claims actions, divorces, collection suits, paternity actions, support or custody modifications, and contract disputes.

☒ No

☐ Yes. Fill in the details.

* * *

10. Within 1 year before you filed for bankruptcy, was any of your property repossessed, foreclosed, garnished, attached, seized, or levied?

Check all that apply and fill in the details below.

☒ No. Go to line 11.

☐ Yes. Fill in the information below.

* * *

11. Within 90 days before you filed for bankruptcy, did any creditor, including a bank or financial institution, set off any amounts from your accounts or refuse to make a payment because you owed a debt?

Check all that apply and fill in the details below.

☒ No

☐ Yes. Fill in the details.

* * *

12. Within 1 year before you filed for bankruptcy, was any of your property in the possession of an assignee for the benefit of creditors, a court-appointed receiver, a custodian, or another official?

☒ No

☐ Yes

Part 5: List Certain Gifts and Contributions

13. Within 2 years before you filed for bankruptcy, did you give any gifts with a total value of more than \$600 per person?

☒ No

☐ Yes. Fill in the details for each gift.

* * *

14. Within 2 years before you filed for bankruptcy, did you give any gifts or contributions with a total value of more than \$600 to any charity?

☒ No

☐ Yes. Fill in the details for each gift or contribution.

* * *

Part 6: List Certain Losses

15. Within 1 year before you filed for bankruptcy or since you filed for bankruptcy, did you lose anything because of theft, fire, other disaster, or gambling?

☒ No

☐ Yes. Fill in the details.

* * *

Part 7: List Certain Payments or Transfers

16. Within 1 year before you filed for bankruptcy, did you or anyone else acting on your behalf pay or transfer any property to anyone you consulted about seeking bankruptcy or preparing a bankruptcy petition?

Include any attorneys, bankruptcy petition preparers, or credit counseling agencies for services required in your bankruptcy

☐ No

☒ Yes. Fill in the details.

Person Who Was Paid	Description and value of any property transferred	Date payment or transfer was made	Amount of payment
Address			
Email or website address			
Person Who Made the Payment, if Not You			

InCharge Education Foundation	\$50	\$0.00
--	-------------	---------------

17. Within 1 year before you filed for bankruptcy, did you or anyone else acting on your behalf pay or transfer any property to anyone who promised to help you deal with your creditors or to make payments to your creditors?

Do not include any payment or transfer that you listed on line 16.

- ☒ No
☐ Yes. Fill in the details.

* * *

18. Within 2 years before you filed for bankruptcy, did you sell, trade, or otherwise transfer any property to anyone, other than property transferred in the ordinary course of your business or financial affairs?

Include both outright transfers and transfers made as security (such as the granting of a security interest or mortgage on your property). Do not include gifts and transfers that you have already listed on the statement.

- ☒ No
☐ Yes. Fill in the details.

* * *

19. Within 10 years before you filed for bankruptcy, did you transfer any property to a self-settled trust or similar device of which you

are a beneficiary? (These are often called *asset-protection devices*.).

- ☐ No
- ☐ Yes. Fill in the details.

* * *

Part 8: List Certain Financial Accounts, Instruments, Safe Deposit Boxes, and Storage Units

20. Within 1 year before you filed for bankruptcy, were any financial accounts or instruments held in your name, or for your benefit, closed, sold, moved, or transferred?

Include checking, savings, money market, or other financial accounts; certificates of deposit; shares in banks, credit unions, brokerage houses, pension funds, cooperatives, associations, and other financial institutions.

- ☐ No
- ☐ Yes. Fill in the details.

* * *

21. Do you now have, or did you have within 1 year before you filed for bankruptcy, any safe deposit box or other depository for securities, cash, or other valuables?

- ☐ No
- ☐ Yes. Fill in the details.

* * *

22. Have you stored property in a storage unit or place other than your home within 1 year before you filed for bankruptcy?

- ☒ No
- ☐ Yes. Fill in the details.

* * *

**Part 9: Identify Property You Hold or Control
for Someone Else**

23. Do you hold or control any property that someone else owns? Include any property you borrowed from, are storing for, or hold in trust for someone?

- ☒ No
- ☐ Yes. Fill in the details.

* * *

**Part 10: Give Details About Environmental
Information**

For the purpose of Part 10, the following definitions apply:

■ *Environmental law* means any federal, state, or local statute or regulation concerning pollution, contamination, releases of hazardous or toxic substances, wastes, or material into the air, land, soil, surface water, groundwater, or other medium, including statutes or regulations controlling the cleanup of these substances, wastes, or material.

■ *Site* means any location, facility, or property as defined under any environmental law, whether you now own, operate, or utilize it or used to own, operate, or utilize it, including disposal sites.

■ *Hazardous material* means anything an environmental law defines as a hazardous waste, hazardous substance, toxic substance, hazardous material, pollutant, contaminant, or similar term.

Report all notices, releases, and proceedings that you know about, regardless of when they occurred.

24. Has any governmental unit notified you that you may be liable or potentially liable under or in violation of an environmental law?

☒ No

☐ Yes. Fill in the details.

* * *

25. Have you notified any governmental unit of any release of hazardous material?

☒ No

☐ Yes. Fill in the details.

* * *

26. Have you been a party in any judicial or administrative proceeding under any environmental law? Include settlements and orders

☒ No

☐ Yes. Fill in the details.

* * *

Part 11: Give Details About Your Business or Connections to Any Business

27. Within 4 years before you filed for bankruptcy, did you own a business or have any of the following connections to any business?

☐ A sole proprietor or self-employed in a trade, profession, or other activity, either full-time or part-time

- ☐ A member of a limited liability company (LLC) or limited liability partnership (LLP)
- ☐ A partner in a partnership
- ☐ An officer, director, or managing executive of a corporation
- ☐ An owner of at least 5% of the voting or equity securities of a corporation
- ☒ No. None of the above applies. Go to Part 12.
- ☐ Yes. Check all that apply above and fill in the details below for each business.

* * *

28. Within 2 years before you filed for bankruptcy, did you give a financial statement to anyone about your business? Include all financial institutions, creditors, or other parties.

- ☒ No
- ☐ Yes. Fill in the details below.

* * *

Part 12: Sign Below

I have read the answers on this Statement of Financial Affairs and any attachments, and I declare under penalty of perjury that the answers are true and correct. I understand that making a false statement, concealing property, or obtaining money or property by fraud in connection with a bankruptcy case can result in fines up to \$250,000, or imprisonment for up to 20 years, or both.

18 U.S.C. §§ 152, 1341, 1519, and 3571.

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/s/ Thomas Lee Keathley, Sr.

Thomas Lee Keathley, Sr.

Signature of Debtor 1

Date **December 27, 2019**

x /s/ Connie Irene Keathley

Connie Irene Keathley

Signature of Debtor 2

Date **December 27, 2019**

Did you attach additional pages to Your Statement of Financial Affairs for Individuals Filing for Bankruptcy (Official Form 107)?

☒ No

☐ Yes.

Did you pay or agree to pay someone who is not an attorney to help you fill out bankruptcy forms?

☒ No

☐ Yes. Name of Person _____. Attach the *Bankruptcy Petition Preparer's Notice, Declaration, and Signature* (Official Form 119).

Fill in this information to identify your case:
Debtor 1 <u>Thomas Lee Keathley, Sr.</u>
Debtor 2 <u>Connie Irene Keathley</u>
(Spouse if, filing)
United States Bankruptcy Court for the:
<u>EASTERN DISTRICT OF ARKANSAS</u>
Case Number _____
(if known)

Check as directed in lines 17 and 21:
According to the calculations required by this Statement:
<input checked="" type="checkbox"/> 1. Disposable income is not determined under 11 U.S.C. § 1325(b)(3). <input type="checkbox"/> 2. Disposable income is determined under 11 U.S.C. § 1325(b)(3).
<input checked="" type="checkbox"/> 3. The commitment period is 3 years. <input type="checkbox"/> 4. The commitment period is 5 years.

☐ Check if this is an amended filing

Official Form 122C-1

Chapter 13 Statement of Your Current Monthly and Calculation of Commitment Period 10/19

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for being accurate. If more space is needed, attach a separate sheet to this form. Include the line number to which the additional information applies. On the top of

any additional pages, write your name and case number (if known).

Part 1: Calculate Your Average Monthly Income

1. What is your marital and filing status? Check one only.

☐ Not married. Fill out Column A, lines 2-11.

☒ Married. Fill out both Columns A and B, lines 2-11.

Fill in the average monthly income that you received from all sources, derived during the 6 full months before you file this bankruptcy case. 11 U.S.C. § 101(10A). For example, if you are filing on September 15, the 6-month period would be March 1 through August 31. If the amount of your monthly income varied during the 6 months, add the income for all 6 months and divide the total by 6. Fill in the result. Do not include any income amount more than once. For example, if both spouses own the same rental property, put the income from that property in one column only. If you have nothing to report for any line, write \$0 in the space.

2. Your gross wages, salary, tips, bonuses, overtime, and commissions (before all payroll deductions).	Column A Debtor 1	Column B Debtor 2
	\$ <u>3,678.90</u>	

3. Alimony and maintenance payments. Do not include payments from a spouse if Column B is filled in.	Column A \$ <u>0.00</u>	Column B \$ <u>0.00</u>
---	----------------------------	----------------------------

4. All amounts from any source which are regularly paid for household expenses of you or your dependents, including child support. Include regular contributions from an unmarried partner, members of your household, your dependents, parents, and roommates. Do not include payments you listed on line 3.

\$ 0.00 \$ 0.00

5. Net income from operating a business, profession, or farm. Debtor 1

Gross receipts (before all deductions) \$ 0.00

Ordinary and necessary operating expenses -\$ 0.00

Column A Column B
Debtor 1 Debtor 2

Net monthly income from a business, profession, or farm \$0.00

Copy here-> \$ 0.00 \$ 0.00

6. Net income from rental and other real property. Debtor 1

Gross receipts (before all deductions) \$ 0.00

Ordinary and necessary operating expenses -\$ 0.00

Column A Column B
Debtor 1 Debtor 2

Net monthly income from rental or other real property \$0.00

Copy here-> \$ 0.00 \$ 0.00

Column A Column B
Debtor 1 Debtor 2

7. Interest, dividends, and royalties \$ 0.00 \$ 0.00

8. Unemployment compensation

Do not enter the amount if you contend that the amount received was a benefit under the Social Security Act. Instead, list it here:

For you.....\$ 0.00

For your spouse.....\$ 0.00

9. Pension or retirement income. Do

not include any amount received that was a benefit under the Social Security Act. Also, except as stated in the next sentence, do not include any compensation, pension, pay, annuity, or allowance paid by the United States Government in connection with a disability, combat-related injury or disability, or death of a member of the uniformed services. If you received any retired pay paid under chapter 61 of title 10, then include that pay only to the extent that it does not exceed the amount of retired pay to which you would otherwise be entitled if retired under any provision of title 10 other than chapter 61 of that title.

\$ 0.00 \$ 0.00

10. Income from all other sources not listed above. Specify the source and amount. Do not include any benefits received under the Social Security Act; payments

received as a victim of a war crime, a crime against humanity, or international or domestic terrorism; or compensation, pension, pay, annuity, or allowance paid by the United States Government in connection with a disability, combat-related injury or disability, or death of a member of the uniformed services. If necessary, list other sources on a separate page and put the total below.

	\$ <u>0.00</u>	\$ <u>0.00</u>
Total amounts from separate pages, if any.	\$ <u>0.00</u>	\$ <u>0.00</u>

11. Calculate your total average monthly income. Add lines 2 through 10 for each column. Then add the total for Column A to the total for Column B.

$$\begin{array}{r} \$ 3,678.90 \\ + \underline{\$ 0.00} \\ \hline = \$3,678.90 \end{array}$$

Part 2: Determine How to Measure Your Deductions from Income

12. Copy your total average monthly income from line 11..... \$ 3,678.90

13. Calculate the marital adjustment. Check one:

☐ You are not married. Fill in 0 below.

☒ You are married and your spouse is filing with you. Fill in 0 below.

☐ You are married and your spouse is not filing with you.

You are married and your spouse is not filing with you.

Fill in the amount of the income listed in line 11, Column B, that was NOT regularly paid for the household expenses of you or your dependents, such as payment of the spouse's tax liability or the spouse's support of someone other than you or your dependents.

Below, specify the basis for excluding this income and the amount of income devoted to each purpose. If necessary, list additional adjustments on a separate page.

* * *

Total.....\$ 0.00 Copy here=> - 0.00

14. Your current monthly income. Subtract line 13 from line 12. \$ 3,678.90

15. Calculate your current monthly income for the year. Follow these steps:

15a. Copy line 14 here =>..... \$ 3,678.90

Multiply line 15a by 12 (the number of months in a year). x 12

15b. The result is your current monthly income for the year for this part of the form. \$ 44,146.80

16. Calculate the median family income that applies to you. Follow these steps:

16a. Fill in the state in which you live. AR

16b. Fill in the number of people in your household. 2

16c. Fill in the median family income for your state and size of household.\$ 52,986.00

17. How do the lines compare.

17a. ☒ Line 15b is less than or equal to line 16c. On the top of page 1 of this form, check box 1, *Disposable income is not determined under 11 U.S.C. § 1325(b)(3)*. **Go to Part 3.** Do NOT fill out *Calculation of Your Disposable Income* (Official Form 122C-2).

17b. ☐ Line 15b is more than line 16c. On the top of page 1 of this form, check box 2, *Disposable income is determined under 11 U.S.C. § 1325(b)(3)*. **Go to Part 3 and fill out Calculation of Your Disposable Income (Official Form 122C-2).** On line 39 of that form, copy your current monthly income from line 14 above.

Part 3: Calculate Your Commitment Period Under 11 U.S.C. § 1325(b)(4)

18. Copy your total average monthly income from line 11..... \$ 3,678.90

19. Deduct the marital adjustment if it applies.
If you are married, your spouse is not filing with you, and you. contend that calculating the

commitment period under 11 U.S.C. § 1325(b)(4) allows you to deduct part of your spouse's income, copy the amount from line 13.

19a. If the marital adjustment does not apply, fill in 0 on line 19a. -\$ 0.00

19b. Subtract line 19a from line 18. \$ 3,678.90

20. Calculate your current monthly income for the year. Follow these steps:

20a. Copy line 19b. \$ 3,678.90

Multiply by 12 (the number of months in a year)

x 12

20b. The result is your current monthly income for the year for this part of the form \$ 44,146.80

20c. Copy the median family income for your state and size of household from line 16c... \$ 52,986.00

21. How do the lines compare?

☒ Line 20b is less than line 20c. Unless otherwise ordered by the court, on the top of page 1 of this form, check box 3, *The commitment period is 3 years*. Go to Part 4.

☐ Line 20b is more than or equal to line 20c. Unless otherwise ordered by the court, on the top of page 1 of this form, check box 4, *The commitment period is 5 years*. Go to Part 4.

Part 4: Sign Below

By signing here, under penalty of perjury I declare that the information on this statement and in any attachments is true and correct.

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/s/ Thomas Lee Keathley, Sr.

Thomas Lee Keathley, Sr.

Signature of Debtor 1

Date **December 27, 2019**

MM / DD / YYYY

x /s/ Connie Irene Keathley

Connie Irene Keathley

Signature of Debtor 2

Date **December 27, 2019**

MM / DD / YYYY

* * *

**Notice Required by 11 U.S.C. § 342(b) for
Individuals Filing for Bankruptcy (Form 2010)**

This notice is for you if:

**You are an individual filing for bankruptcy,
and**

Your debts are primarily consumer debts.

Consumer debts are defined in 11 U.S.C. § 101(8)
as “incurred by an individual primarily for a
personal, family, or household purpose.”

**The types of bankruptcy that are available to
individuals**

Individuals who meet the qualifications may file
under one of four different chapters of Bankruptcy
Code:

Chapter 7 - Liquidation

Chapter 11 - Reorganization

Chapter 12 - Voluntary repayment plan for
family farmers or fishermen

Chapter 13 - Voluntary repayment plan for
individuals with regular income

**You should have an attorney review your
decision to file for bankruptcy and the choice of
chapter.**

* * *

Read These Important Warnings

Because bankruptcy can have serious long-term
financial and legal consequences, including loss
of your property, you should hire an attorney and
carefully consider all of your options before you
file. Only an attorney can give you legal advice
about what can happen as a result of filing for

bankruptcy and what your options are. If you do file for bankruptcy, an attorney can help you fill out the forms properly and protect you, your family, your home, and your possessions.

Although the law allows you to represent yourself in bankruptcy court, you should understand that many people find it difficult to represent themselves successfully. The rules are technical, and a mistake or inaction may harm you. If you file without an attorney, you are still responsible for knowing and following all of the legal requirements.

You should not file for bankruptcy if you are not eligible to file or if you do not intend to file the necessary documents.

Bankruptcy fraud is a serious crime; you could be fined and imprisoned if you commit fraud in your bankruptcy case. Making a false statement, concealing property, or obtaining money or property by fraud in connection with a bankruptcy case can result in fines up to \$250,000, or imprisonment for up to 20 years, or both. 18 U.S.C. §§ 152, 1341, 1519, and 3571.

* * *

Chapter 13 is for individuals who have regular income and would like to pay all or part of their debts in installments over a period of time and to discharge some debts that are not paid. You are eligible for chapter 13 only if your debts are not more than certain dollar amounts set forth in 11 U.S.C. § 109.

Under chapter 13, you must file with the court a plan to repay your creditors all or part of the money that you owe them, usually using your future earnings. If

the court approves your plan, the court will allow you to repay your debts, as adjusted by the plan, within 3 years or 5 years, depending on your income and other factors.

After you make all the payments under your plan, many of your debts are discharged. The debts that are not discharged and that you may still be responsible to pay include:

- domestic support obligations,
- most student loans,
- certain taxes,
- debts for fraud or theft,
- debts for fraud or defalcation while acting in a fiduciary capacity,
- most criminal fines and restitution obligations,
- certain debts that are not listed in your bankruptcy papers,
- certain debts for acts that caused death or personal injury, and
- certain long-term secured debts.

Warning: File Your Form on Time

Section 521(a)(1) of the Bankruptcy Code requires that you promptly file detailed information about your creditors, assets, liabilities, income, expenses and general financial condition. The court may dismiss your bankruptcy case if you do not file this information within the deadlines set by the Bankruptcy Code, the Bankruptcy Rules, and the local rules of the court.

For more information about the documents and their deadlines, go to:

<p>http://www.uscourts.gov/bkforms/bankruptcy_forms.html#procedure.</p>

Bankruptcy crimes have serious consequences

If you knowingly and fraudulently conceal assets or make a false oath or statement under penalty of perjury—either orally or in writing—in connection with a bankruptcy case, you may be fined, imprisoned, or both.

All information you supply in connection with a bankruptcy case is subject to examination by the Attorney General acting through the Office of the U.S. Trustee, the Office of the U.S. Attorney, and other offices and employees of the U.S. Department of Justice.

Make sure the court has your mailing address

The bankruptcy court sends notices to the mailing address you list on *Voluntary Petition for Individuals Filing for Bankruptcy* (Official Form 101). To ensure that you receive information about your case, Bankruptcy Rule 4002 requires that you notify the court of any changes in your address.

A married couple may file a bankruptcy case together—called a *joint case*. If you file a joint case and each spouse lists the same mailing address on the bankruptcy petition, the bankruptcy court generally will mail you and your spouse one copy of each notice, unless you file a statement with the court asking that each spouse receive separate copies.

Understand which services you could receive from credit counseling agencies

The law generally requires that you receive a credit counseling briefing from an approved credit

counseling agency. 11 U.S.C. § 109(h). If you are filing a joint case, both spouses must receive the briefing. With limited exceptions, you must receive it within the 180 days **before** you file your bankruptcy petition. This briefing is usually conducted by telephone or on the Internet.

In addition, after filing a bankruptcy case, you generally must complete a financial management instructional course before you can receive a discharge. If you are filing a joint case, both spouses must complete the course.

You can obtain the list of agencies approved to provide both the briefing and the instructional course from:

http://justice.gov/ust/eo/hapcpa/ccde/cc_approved.html.

In Alabama and North Carolina, go to:

<http://www.uscourts.gov/FederalCourts/Bankruptcy/BankruptcyResources/ApprovedCreditAndDebtCounselors.aspx>.

If you do not have access to a computer, the clerk of the bankruptcy court may be able to help you obtain the list.

**United States Bankruptcy Court
Eastern District of Arkansas**

Thomas Lee Keathley, Sr.

In re **Connie Irene Keathley** Case No. _____
Debtor(s) Chapter **13**

**DISCLOSURE OF COMPENSATION OF
ATTORNEY FOR DEBTOR(S)**

1. Pursuant to 11 U.S.C. § 329(a) and Fed. Bankr. P. 2016(b), I certify that I am the attorney for the above named debtor(s) and that compensation paid to me within one year before the filing of the petition in bankruptcy, or agreed to be paid to me, for services rendered or to be rendered on behalf of the debtor(s) in contemplation of or in connection with the bankruptcy case is as follows:

For legal services, I have agreed to accept.....	\$ <u>2,000.00</u>
Prior to the filing of this statement I have received	\$ <u>0.00</u>
Balance Due.....	\$ <u>2,000.00</u>

2. The source of the compensation paid to me was:

☒ Debtor ☐ Other (specify):

3. The source of compensation to be paid to me is:

☒ Debtor ☐ Other (specify):

4. ☒ I have not agreed to share the above-disclosed compensation with any other person unless they are members and associates of my law firm.

☐ I have agreed to share the above-disclosed compensation with a person or persons who are not

members or associates of my law firm. A copy of the agreement, together with a list of the names of the people sharing in the compensation is attached.

5. In return for the above-disclosed fee, I have agreed to render legal service for all aspects of the bankruptcy case, including:

- a. Analysis of the debtor's financial situation, and rendering advice to the debtor in determining whether to file a petition in bankruptcy;
- b. Preparation and filing of any petition, schedules, statement of affairs and plan which may be required;
- c. Representation of the debtor at the meeting of creditors and confirmation hearing, and any adjourned hearings thereof;
- d. [Other provisions as needed]

Negotiations with secured creditors to reduce to market value; exemption planning; preparation and filing of reaffirmation agreements and applications as needed; preparation and filing of motions pursuant to 11 USC 522(f)(2)(A) for avoidance of liens on household goods.

6. By agreement with the debtor(s), the above-disclosed fee does not include the following service:

Representation of the debtors in any dischargeability actions, judicial lien avoidances, relief from stay actions or any other adversary proceeding.

CERTIFICATION

I certify that the foregoing is a complete statement of any agreement or arrangement for payment to me for representation of the debtor(s) in this bankruptcy proceeding.

December 27, 2019

Date

/s/ Bart Zeigenhorn

Bart Zeigenhorn

Signature of Attorney

Bart Zeigenhorn

P.O. Box 830

West Memphis, AR 72301

(870) 732-9100

Fax: (870) 732-9105

Name of law firm

JA-176

**United States Bankruptcy Court
Eastern District of Arkansas**

Thomas Lee Keathley, Sr.

In re **Connie Irene Keathley** Case No. _____
Debtor(s) Chapter **13**

VERIFICATION OF CREDITOR MATRIX

The above-named Debtors hereby verify that the attached list of creditors is true and correct to the best of their knowledge.

Date: **December 27, 2019**

/s/ Thomas Lee Keathley, Sr.
Thomas Lee Keathley, Sr.
Signature of Debtor

Date: **December 27, 2019**

/s/ Connie Irene Keathley
Connie Irene Keathley
Signature of Debtor

Aaron's Rental
1800 N. Missouri, Suite 3
West Memphis, AR 72301

Dept. Finance & Administration
P.O. Box 8090
Little Rock, AR 72203

Internal Revenue Service
Department of Treasury
P. O. Box 7346
Philadelphia, PA 19101-7346

JA-177

Rushmore Loan Management Svcs
PO Box 814529
Peoria, AZ 85381

JA-178

[ROA 1049]

IN THE UNITED STATES BANKRUPTCY COURT
EASTERN DISTRICT OF ARKANSAS
DELTA DIVISION

IN RE: Thomas Lee CASE NO: 2:19-bk-
Keathley Sr. and Connie 16848 J
Irene Keathley Chapter 13

ORDER CONFIRMING CHAPTER 13

The Court finds that the plan as filed by the debtors complies with all provisions of Chapter 13 and with all other provisions of Title 11 of the United States Code; that all fees, charges, or amounts required under Chapter 123 of Title 28 or by the plan, to be paid before confirmation, have been paid; that the plan has been proposed in good faith and not by any means forbidden by law; that the plan complies with Section 1325 of the United States Bankruptcy Code and that the plan should be confirmed. Therefore,

IT IS ORDERED:

1. All objections to the plan are withdrawn or, by entry of this order, overruled. The plan should be and hereby is confirmed. To effectuate the plan, the debtors shall pay to the Trustee according to the plan, which plan shall not exceed 60 months. The payments shall continue until further orders of the Court.

2. Notwithstanding any plan term to the contrary, the debtors may not obtain a refund or disbursement from the trustee without a court order

after notice and hearing, except that upon conversion to a Chapter 7 case, the Trustee is ordered to return undistributed postpetition wages or regular income to the debtor unless otherwise ordered by the court.

3. Notwithstanding the provisions of the chapter 13 plan, the Trustee shall receive such percentage fee of plan payments as may be periodically fixed by the Attorney General pursuant to 28 U.S.C. §586 and pursuant to 11 U.S.C. §1326(b)(2).

4. Whenever the plan confirmed by this order refers to the debt, debts, claim or claims of creditors, such reference shall be construed to mean allowed claim or allowed claims. The total amount of an allowed claim shall be the amount stated on a proof of claim properly filed by or on behalf of such creditor, unless the court determines a different amount following the filing of an objection to such claim.

IT IS SO ORDERED.

Date: 04/20/2020

s/ Phyllis M. Jones

Phyllis M. Jones

U.S. Bankruptcy Judge

JA-180

[ROA 1188-89]

**IN THE UNITED STATES DISTRICT COURT
FOR THE NORTHERN DISTRICT OF
MISSISSIPPI OXFORD DIVISION**

THOMAS KEATHLEY,

Plaintiff,

v.

No. 3:21cv261-MPM-

BUDDY AYERS

RP

CONSTRUCTION, INC.,
AND DAVID FOWLER,
INDIVIDUALLY, AND AS
AN EMPLOYEE, AGENT,
AND/OR SERVANT OF
BUDDY AYERS
CONSTRUCTION, INC.,

JURY DEMANDED

Defendants.

AFFIDAVIT OF BART ZIEGENHORN

STATE OF Arkansas
COUNTY OF Crittenden

Personally appeared before me, the undersigned authority, Bart Ziegenhorn, after being first duly sworn makes oath and states:

1. I, Bart Ziegenhorn, am an adult resident of Crittenden County, Arkansas, over the age of eighteen (18), and otherwise competent to execute this Affidavit. I have personal knowledge of the facts recited in this Affidavit.

2. I am an Attorney with Ziegenhorn & Bernard, 106 Dover Road, Suite B, West Memphis, Arkansas

72301. I am a member of good standing of the bar in Arkansas. I have maintained an active Tennessee and Arkansas license since 1993 but in December 2022 I converted my Tennessee license to inactive.

3. My representation of Thomas Keathley commenced in 2019, when he retained me to file for Chapter 13 bankruptcy in the United States Bankruptcy Court for the Eastern District of Arkansas.

4. I filed Thomas Keathley's Chapter 13 Bankruptcy Petition and Bankruptcy Plan on December 27, 2019. I filed an amended Bankruptcy Plan on March 11, 2020 that was confirmed by the Court on April 20, 2020. At that time, the schedule filed with the Bankruptcy Petition accurately represented that Thomas Keathley did not have any contingent or unliquidated assets. Mr. Keathley's original confirmed plan agreed to pay all creditors 100%.

5. On March 1, 2022 and June 27, 2022, I filed Amended Bankruptcy Plans that were confirmed by the Bankruptcy Court on July 20, 2022. The Amended Bankruptcy Plans did not contain any representations from Thomas Keathley regarding his assets.

6. The Amended Bankruptcy Plan confirmed by the Court on July 20, 2022 did not in any way change the administration of the bankruptcy.

7. The Amended Bankruptcy Plan only changed the repayment schedule. All creditors are being paid 100% of Thomas Keathley's debt under the plan.

8. Even if the Bankruptcy Court was aware of the Thomas Keathley's personal injury claims at the time

it confirmed the Amended Bankruptcy Plan, the claims would have had no material effect on the Court's confirmation of the plan.

9. Thomas Keathley received no benefit monetarily, or otherwise, from the nondisclosure of his personal injury claim after the initial filing of his bankruptcy petition.

FURTHER AFFIANT SAITH NOT.

s/ Bart Ziegenhorn
Bart Ziegenhorn

SWORN TO AND SUBSCRIBED BEFORE ME, the undersign authority, this the 6th day of April, 2023.

My commission expires:

2-1-2028

[notary seal omitted] s/ Jodi Dawn Rhyne
Notary Public

JA-183

[ROA 1190-91]

**IN THE UNITED STATES DISTRICT COURT
FOR THE NORTHERN DISTRICT OF
MISSISSIPPI OXFORD DIVISION**

THOMAS KEATHLEY,

Plaintiff,

v.

No. 3:21cv261-MPM-

BUDDY AYERS

RP

CONSTRUCTION, INC.,
AND DAVID FOWLER,
INDIVIDUALLY, AND AS
AN EMPLOYEE, AGENT,
AND/OR SERVANT OF
BUDDY AYERS
CONSTRUCTION, INC.,

JURY DEMANDED

Defendants.

AFFIDAVIT OF THOMAS KEATHLEY

STATE OF ARKANSAS
COUNTY OF CRITTENDEN

Personally appeared before me, the undersigned authority, Thomas Keathley, after being first duly sworn makes oath and states:

1. I, Thomas Keathley, am an adult resident of Crittenden County, Arkansas, over the age of eighteen (18), and otherwise competent to execute this Affidavit. I have personal knowledge of the facts recited in this Affidavit.

2. I filed Chapter 13 Bankruptcy Petition and Bankruptcy Plan on December 27, 2019. I filed an

amended Bankruptcy Plan on March 11, 2020 that was confirmed by the Court on April 20, 2020. At that time, the schedule filed with the Bankruptcy Petition accurately represented that I did not have any contingent or unliquidated assets.

3. I was involved in a motor vehicle collision on August 23, 2021.

4. On August 24, 2021, I retained Austin Alders, Esq. to represent me for personal injuries sustained in the motor vehicle collision.

5. Some time in the weeks after retaining Mr. Alders, I notified him of my bankruptcy and he advised me to notify my bankruptcy attorney of the personal injury claims arising from the August 23, 2021, collision.

6. Shortly thereafter, I notified my bankruptcy attorney, Bart Ziegenhorn, of the August 23, 2021 collision and the personal injury claims I was pursuing as a result of the collision.

7. After notifying Mr. Ziegenhorn of the wreck and my personal injury claims, I believed I had done everything I needed to do.

8. I never intended to make any misrepresentations concerning the existence of my personal injury claim.

9. I do not know why the personal injury claims were not disclosed to the bankruptcy court sooner.

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FURTHER AFFIANT SAITH NOT.

s/ Thomas Keathley
Thomas Keathley

SWORN TO AND SUBSCRIBED BEFORE ME, the
undersign authority, this the 7th day of April,
2023.

My commission expires: 9-29-2023

[notary seal omitted] s/ Keith A. Youd
Notary Public

JA-186

[ROA 1192-1198]

Fill in this information to identify your case:
Debtor 1 <u>Thomas Lee Keathley, Sr.</u> First Name Middle Name Last Name
Debtor 2 (Spouse if, filing) <u>Connie Irene Keathley</u> First Name Middle Name Last Name
United States Bankruptcy Court for the: <u>EASTERN DISTRICT OF ARKANSAS</u>
Case Number <u>2:19-bk-16848</u> (if known)

☐ Check if this is an amended filing

Official Form 106A/B

Schedule A/B: Property **12/15**

In each category, separately list and describe items. List an asset only once. If an asset fits in more than one category, list the asset in the category where you think it fits best. Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, attach a separate sheet to this form. On the top of any additional pages, write your name and case number (if known). Answer every question.

Part 1: Describe Each Residence, Building, Land, or Other Real Estate You Own or Have an Interest In

JA-187

1. Do you own or have any legal or equitable interest in any residence, building, land, or similar property?

☐ No. Got to Part 2.

☒ Yes. Where is the property?

1.1	Street address, if available, or other description	What is the property? Check all that apply	Do not deduct secured claims or exemptions. Put the amount of any secured claims on <i>Schedule D: Creditors Who Have Claims Secured by Property</i> . Current value of the entire property?
	City State ZIP Code	<input type="checkbox"/> Single-family home <input type="checkbox"/> Duplex or multi-unit building <input type="checkbox"/> Manufactured or mobile home <input type="checkbox"/> Land <input type="checkbox"/> Investment property <input type="checkbox"/> Timeshare <input type="checkbox"/> Other _____	\$275,000.00
	County	Who has an interest in the property? Check one <input type="checkbox"/> Debtor 1 only <input type="checkbox"/> Debtor 2 only <input checked="" type="checkbox"/> Debtor 1 and Debtor 2 only	Current value of the portion you own? \$275,000.00 Describe the nature of your ownership interest (such as fee simple, tenancy by the entireties, or a life estate), if known.

<input type="checkbox"/> At least one of the debtors and another Other information you wish to add about the item, such as local property identification number: Residence .25 acre encompassing house 511 Apperson Dr. Marion, AR 72364	<input type="checkbox"/> Check if this is community property (see instructions)
--	---

If you own or have more than one, list here:	
1.2	What is the property? all that apply
Street address, if available, or other description	<input type="checkbox"/> Single-family home <input type="checkbox"/> Duplex or multi-unit building
City	State ZIP Code

Check Do not deduct secured claims or exemptions. Put the amount of any secured claims on *Schedule D*:

_____ County	<input type="checkbox"/> Manufactured or mobile home <input type="checkbox"/> Land <input type="checkbox"/> Investment property <input type="checkbox"/> Timeshare <input type="checkbox"/> Other _____ Who has an interest in the property? Check one <input type="checkbox"/> Debtor 1 only <input type="checkbox"/> Debtor 2 only <input checked="" type="checkbox"/> Debtor 1 and Debtor 2 only <input type="checkbox"/> At least one of the debtors and another Other information you wish to add about the item, such as local property identification number: _____	<i>Creditors Who Have Claims Secured by Property.</i> Current value of the entire property? \$1,000.00 _____ Current value of the portion you own? \$1,000.00 _____ Describe the nature of your ownership interest (such as fee simple, tenancy by the entireties, or a life estate), if known. _____ <input type="checkbox"/> Check if this is community property (see instructions)
-----------------	--	--

.55 acre of unexempt
urban homestead
(restrictive covenant
property on subdivision of
property and dwellings)
511 Apperson Drive
Marion, AR.

2. Add the dollar value of the portion you own for all your
entries from Part 1, including any entries for pages you
have attached for Part 1. Write that number
here.....=>

\$276,000.00

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Part 2: Describe Your Vehicles

Do you own, lease, or have legal or equitable interest in any vehicles, whether they are registered or not? Include any vehicles you own that someone else drives. If you lease a vehicle, also report it on *Schedule G: Executory Contracts and Unexpired Leases*.

3. Cars, vans, trucks, tractors, sport utility vehicles, motorcycles

☐ No.

☒ Yes.

3.1 Make _____	Who has an interest in the property? Check one	Do not deduct secured claims or exemptions. Put the amount of any secured claims on <i>Schedule D: Creditors Who Have Claims Secured by Property</i> .
Model _____	<input type="checkbox"/> Debtor 1 only	Current value of the entire property? <u>\$3,500.00</u>
Year _____	<input type="checkbox"/> Debtor 2 only	Current value of the portion you own? <u>\$3,500.00</u>
Approximate mileage _____	<input checked="" type="checkbox"/> Debtor 1 and Debtor 2 only	
Other information: _____	<input type="checkbox"/> At least one of the debtors and another	
2003 Cadillac Truck	<input type="checkbox"/> Check if this is community property (see instructions)	
Possession of debtor		
<hr/>		
3.2 Make _____	Who has an interest in the property? Check one	Do not deduct secured claims or exemptions. Put
Model _____		

Year _____ Approximate mileage _____ Other information: 1995 Cadillac Deville 155k	<input type="checkbox"/> Debtor 1 only <input type="checkbox"/> Debtor 2 only <input checked="" type="checkbox"/> Debtor 1 and Debtor 2 only <input type="checkbox"/> At least one of the debtors and another <input type="checkbox"/> Check if this is community property (see instructions)	the amount of any secured claims on <i>Schedule D</i> : <i>Creditors Who Have Claims Secured by Property</i> . Current value of the entire property? <u>\$900.00</u> Current value of the portion you own? <u>\$900.00</u>
3.3 Make _____ Model _____ Year _____ Approximate mileage _____ Other information: 2011 Honda Aero	Who has an interest in the property? Check one <input type="checkbox"/> Debtor 1 only <input type="checkbox"/> Debtor 2 only <input checked="" type="checkbox"/> Debtor 1 and Debtor 2 only <input type="checkbox"/> At least one of the debtors and another	Do not deduct secured claims or exemptions. Put the amount of any secured claims on <i>Schedule D</i> : <i>Creditors Who Have Claims Secured by Property</i> . Current value of the entire property?

<input type="checkbox"/> Check if this is community property (see instructions)		\$1,500.00
		Current value of the portion you own? \$1,500.00
<hr/>		
3.4 Make Cadillac Model XTS Year 2013 Approximate mileage _____ Other information: _____	Who has an interest in the property? Check one <input type="checkbox"/> Debtor 1 only <input type="checkbox"/> Debtor 2 only <input checked="" type="checkbox"/> Debtor 1 and Debtor 2 only <input type="checkbox"/> At least one of the debtors and another <input type="checkbox"/> Check if this is community property (see instructions)	Do not deduct secured claims or exemptions. Put the amount of any secured claims on <i>Schedule D: Creditors Who Have Claims Secured by Property</i> . Current value of the entire property? \$10,000.00
		Current value of the portion you own? \$10,000.00

4. Watercraft, aircraft, motor homes, ATVs and other recreational vehicles, other vehicles, and accessories

Examples: Boats, trailers, motors, personal watercraft, fishing vessels, snowmobiles, motorcycle accessories

☒ No

☐ Yes

5. Add the dollar value of the portion you own for all of your entries from Part 2, including any entries for pages you have attached for Part 2. Write that number here.....=>

\$15,900.00

Part 3: Describe Your Personal and Household Items

Do you own or have any legal or equitable interest in any of the following items?

Current value of the portion you own?

Do not deduct secured claims or exemptions.

6. Household goods and furnishings

Examples: Major appliances, furniture, linens, china, kitchenware

☐ No

☒ Yes. Describe.....

3 sets furnished bedrooms, living room
--

furniture, 2 tvs, kitchen table/chairs, refrigerator possession of debtor

\$1,500.00

7. Electronics

Examples: Televisions and radios; audio, video, stereo, and digital equipment; computers, printers, scanners; music collections; electronic devices including cell phones, cameras, media players, games

☒ No

☐ Yes. Describe.....

8. Collectibles of value

Examples: Antiques and figurines; paintings, prints, or other artwork; books, pictures, or other art objects; stamp, coin, or baseball card collections; other collections, memorabilia, collectibles

☒ No

☐ Yes. Describe.....

9. Equipment for sports and hobbies

Examples: Sports, photographic, exercise, and other hobby equipment; bicycles, pool tables, golf clubs, skis; canoes and kayaks; carpentry tools; musical instruments

☒ No

☐ Yes. Describe.....

10. Firearms

Examples: Pistols, rifles, shotguns, ammunition, and related equipment

☒ No

☐ Yes. Describe.....

11. Clothes

Examples: Everyday clothes, furs, leather coats, designer wear, shoes, accessories

☐ No

☒ Yes. Describe.....

clothes

\$50.00

12. Jewelry

Examples: Everyday jewelry, costume jewelry, engagement rings, wedding rings, heirloom jewelry, watches, gems, gold, silver

☒ No

☐ Yes. Describe.....

13. Non-farm animals

Examples: Dog, cats, birds, horses

☒ No

☐ Yes. Describe.....

14. Any other personal and household items you did not already list, including any health aids you did not list

Examples: Pistols, rifles, shotguns, ammunition, and related equipment

☒ No

☐ Yes. Give specific information.....

15. Add the dollar value of your entries from Part 3, including entries for pages you have attached for Part 3. Write the number here....

\$1,550.00

Part 4: Describe Your Financial Assets

Do you own or have any legal or equitable interest in any of the following items?

**Current value
of the portion
you own?**

Do not deduct
secured claims or
exemptions.

16. Cash

Examples: Money you have in your wallet, in your home, in a safe deposit box, and on hand when you file your petition

☒ No

☐ Yes.....

17. Deposits of money

Examples: Checking, savings, or other financial accounts; certificates of deposit; shares in credit unions, brokerage houses, and other similar institutions. If you have multiple accounts with the same institution, list each.

☐ No

☒ Yes..... Institution name:

17.1 checking account

**First Community
Bank**

\$400.00

18. Bonds, mutual funds, or publicly traded stocks

Examples: Bond funds, investment accounts with brokerage firms, money market accounts

☒ No

☐ Yes..... Institution or issuer name

19. Non-publicly traded stock and interests in incorporated and unincorporated businesses, including an interest in an LLC, partnership, and joint venture

☒ No

☐ Yes. Give specific information about them.....

Name of entity: % of ownership

20. Government and corporate bonds and other negotiable and non-negotiable instruments

Negotiable instruments include personal checks, cashiers' checks, promissory notes, and money orders. Non-negotiable instruments are those you cannot transfer to someone by signing or delivering them.

☒ No

☐ Yes. Give specific information about them

Issuer name:

21. Retirement or pension accounts

Examples: Interests in IRA, ERISA, Keogh, 401(k), 403(b), thrift savings accounts, or other pension or profit-sharing plans

☒ No

☐ Yes. List each account separately.

Type of account: Institution name:

22. Security deposits and prepayments

Your share of all unused deposits you have made so that you may continue service or use from a company

Examples: Agreements with landlords, prepaid rent, public utilities (electric, gas, water), telecommunications companies, or others

☒ No

☐ Yes. Institution name or individual:

23. **Annuities** (A contract for a periodic payment of money to you, either for life or for a number of years)

☒ No

☐ Yes. Issuer name and description:

24. **Interests in an education IRA, in an account in a qualified ABLE program, or under a qualified state tuition program.**

26 U.S.C. §§ 530(b)(1), 529A(b), and 529(b)(1).

☒ No

☐ Yes..... Institution name and description.
Separately file the records of any interests. 11
U.S.C. § 521(c):

25. **Trusts, equitable or future interests in property (other than anything listed in line 1), and rights or powers exercisable for your benefit**

☒ No

☐ Yes. Give specific information about them

26. **Patents, copyrights, trademarks, trade secrets, and other intellectual property**

Examples: Internet domain names, websites, proceeds from royalties and licensing agreements

☒ No

☐ Yes. Give specific information about them...

27. Licenses, franchises, and other general intangibles

Examples: Building permits, exclusive licenses, cooperative association holdings, liquor licenses, professional licenses

☒ No

☐ Yes. Give specific information about them...

Money or property owed to you?

Current value of the portion you own?

Do not deduct secured claims or exemptions.

28. Tax refunds owed to you

Examples: Building permits, exclusive licenses, cooperative association holdings, liquor licenses, professional licenses

☒ No

☐ Yes. Give specific information about them, including whether you already filed the returns and the tax years.....

29. Family support

Examples: Past due or lump sum alimony, spousal support, child support, maintenance, divorce settlement, property settlement

☒ No

☐ Yes. Give specific information.....

30. Other amounts someone owes you

Examples: Unpaid wages, disability insurance payments, disability benefits, sick pay, vacation pay,

workers' compensation, Social Security benefits;
unpaid loans you made to someone else

☒ No

☐ Yes. Give specific information..

31. Interests in insurance policies

Examples: Health, disability, or life insurance; health savings account (HSA); credit, homeowner's, or renter's insurance

☒ No

☐ Yes. Name the insurance company of each policy and list its value.

Company name:	Beneficiary:	Surrender or
		refund value:

32. Any interest in property that is due you from someone who has died

If you are the beneficiary of a living trust, expect proceeds from a life insurance policy, or are currently entitled to receive property because someone has died

☒ No

☐ Yes. Give specific information..

33. Claims against third parties, whether or not you have filed a lawsuit or made a demand for payment

Examples: Accidents, employment disputes, insurance claims, or rights to sue

☐ No

☒ Yes. Describe each claim.....

Auto Accident Claim against Buddy Ayers Costruction Co. and David Fowler, arising after filing of Petition	Unknown
--	---------

34. Other contingent and unliquidated claims of every nature, including counterclaims of the debtor and rights to set off claims

If you are the beneficiary of a living trust, expect proceeds from a life insurance policy, or are currently entitled to receive property because someone has died

☒ No

☐ Yes. Describe each claim.....

35. Any financial assets you did not already list

If you are the beneficiary of a living trust, expect proceeds from a life insurance policy, or are currently entitled to receive property because someone has died

☒ No

☐ Yes. Give specific information..

36. Add the dollar value of all of your entries from Part 4, including any entries for pages you have attached for Part 4. Write that number here..... **\$400.00**

Part 5: Describe Any Business-Related Property You Own or Have an Interest In. List any real estate in Part 1.

37. Do you own or have any legal or equitable interest in any business-related property?

☒ No. Go to Part 6.

☐ Yes. Go to line 38.

Part 6: Describe Any Farm- and Commercial Fishing-Related Property You Own or Have an Interest In.

If you own or have an interest in farmland, list it in Part 1.

46. Do you own or have any legal or equitable interest in any farm- or commercial fishing-related property?

☒ No. Go to Part 7.

☐ Yes. Go to line 47.

Part 7: Describe All Property You Own or Have an Interest in That You Did Not List Above

53. Do you have other property of any kind you did not already list?

☐ No.

☒ Yes. Give specific information.....

lawn mower	
possession of debtor	<u>\$50.00</u>
riding mower	<u>\$250.00</u>

54. Add the dollar value of all of your entries from Part 7. Write that number here..... \$300.00

Part 8: List the Totals of Each Part of this Form

55. Part 1: Total real estate, line 2..... \$276,000.00

56. Part 2: Total vehicle, line 5 \$15,900.00

57. Part 3: Total personal and household items, line 15	<u>\$1,550.00</u>
58. Part 4: Total financial assets, line 36	<u>\$400.00</u>
59. Part 5: Total business-related property, line 45	<u>\$0.00</u>
60. Part 6: Total farm- and fishing-related property, line 52	<u>\$0.00</u>
61. Part 7: Total other property not listed, line 54	<u>\$300.00</u>
62. Total personal property. Add lines 56 through 61...	<u>\$18,150.00</u>
Copy personal property total	<u>\$18,150.00</u>
63. Total of all property on Schedule A/B. Add line 55 + line 62	<u>\$294,150.00</u>

[ROA 1259-65]

TENNESSEE DEPARTMENT OF LABOR AND WORKFORCE DEVELOPMENT

EMPLOYER'S FIRST REPORT OF WORK INJURY OR ILLNESS

Jurisdiction Claim # (State File #) 67300 2021

Claims Adm Claim# C166C527361X

Osha Log Case #

Name of Insurance Carrier
INDEMNITY INSURANCE COMPANY
OF NORTH AMERICA

Date State Received 09/01/2021

Carr. FEIN 061016108

FEIN of Clm Adm 952008390

Clms Adj Phone

**Claims Admin Firm Name (if
different from carrier)**

Claims Adjuster Name ESIS INC

Claim Handling Office Address Line1 And Line 2

P.O. BOX 6560 SCRANTON PA 18505 6560

Employer Name	Employer FEIN	SIC Code	Phone Number
J B HUNT TRANSPORT INC.	581081267	484121	4798208363
EmployerAddress Line 1 and Line 2		Nature of Business	
615 J B HUNT CORPORATE DR			
City	State	Zip	Insured Report #
LOWELL	ARKANSAS	72745 9143	
Insured Name(parent co. if different than employer)	POLICY NUMBER	Eff Date	Employment Status Code
J.B. HUNT TRANSPORT, INC.	C67463043	MM/DD/YYYY	REGULAR EMPLOYEE
	Self Insured?	Exp Date	
	<input type="radio"/> Yes <input type="radio"/> No	MM/DD/YYYY	

Employee Last Name KEATHLEY
First THOMAS
Address Line 1 and 2
[REDACTED]
City State Zip [REDACTED]
SSN [REDACTED] Date of Birth [REDACTED] Date of Hire 01/08/2019
[REDACTED] Number of Days worked Per Week
Wage \$ Period 5
0

Gender
• Male ☐ Female ☐ Unknown
Occupational Description
INTERMODAL CLASS A DRIVER LOCA
Marital Status
☐ Unmarried • Married ☐ Separated ☐ Unknown
NCCI Class Code 7219 TRUCKING-NOC-ALL EMPLOYEES & D
Salary Continued in Lieu of Compensation
☐ Yes ☐ No
Full Wages Paid for Date of Injury ☐ Yes ☐ No
Time Employee Began Work on Injury Date

Date of Injury	Time of Injury	Nature of Injury Code	Cause of Injury Code
08/23/2021	1330	59 ALL OTHER SPECIFIC	45 COLLISION OF SIDESWIPE WIT
Date Employer Notified of Injury	Body Part Affected Code		
08/23/2021	90 MULTIPLE BODY PARTS		
Date Claim ADM Notified of Injury	How Injury or Illness Occurred		
08/31/2021	MVAMULTIPLE BODY PARTS		
Date Last Day Worked			
Date Disability Began			Total # Dependents
08/24/2021		* * *	
Return to Work Date(If Applicable)			

Date of Death (if Applicable)

Did Injury/Illness occur on Employers Premises ☐ Yes ☐ No ☐ Unknown

**Postal Code of
Injury Site**

County of Injury

SHELBY

Physicians Name

Hospital or Off Site Treatment Name

Address Line 1 and 2

Address Line 1 and 2

City

State

ZIP

City

State

ZIP

Initial Treatment

No Medical Trmnt

Date Prepared

Preparer's Name
and Title

Preparer,

Company Name

Phone Number

Date: 12/14/2022

Time: 13:22:49

TENNESSEE DEPARTMENT OF LABOR

WORKER'S COMPENSATION CLAIMS SYSTEM

FIRST REPORT OF PAYMENT

State File Nbr. 67300

State File Yr. 2021

SSN [REDACTED]

Date of Injury 08/23/2021

Claimant Information

Name THOMAS MI Last KEATHLEY

Latest First THOMAS MI Last KEATHLEY

Name

Employer(DBA)

Insurer Claim # C166C527361X

Status o WCS • EDI

FEIN 58-1081267

Insurance Carrier

Claim Handler

DBA 2010303356

Name Indemnity Insurance

Name ESIS Inc.

Name J B HUNT

Addr. P.O. BOX 6560

Addr. P.O. BOX 6560

TRANSPORT INC

Addr. 615 J B HUNT
CORPORATE

City	LOWELL	City	SCRANTON	City	SCRANTON
State	ARKANSAS	State	PENNSYLVANIA	State	PENNSYLVANIA
Zip	72745 +4 9143	Zip	18505 +4 6560	Zip	18505 +4 6560

Date Disability Began
08/24/2021

Insured Name J.B.
HUNT TRANSPORT,

Claim Type INDEMNITY

Date of Maximum Medical Improvement 00/00/0000
Return to Work Qualifier

Date of Return/Release to Work 00/00/0000
Date of Representation 00/00/0000
Late Reason Code

Agreement to Compensate Code ☐ Without Liability ☐ With Liability ☒ Unknown

Notice of First Payment ID	2021512721	MTC	
Payment Type	• First Payment	○ Reinstatement	Date State Received 09/07/2021
Date Payment	09/07/2021	Payment Mode	• Mailed ○ Delivered ○ None (NA)
Payment Sent to	○ Employer ○ Employee	• None (NA)	Average Weekly Wage .00

JA-214

Filed Date Stamp
Here
FILED
NOV -4 2021
IN COURT OF
WORKERS'
COMPENSATION
CLAIMS

For BWC Use Only Docket No. <u>2021-08-1082</u> State File No. <u>67300-2021</u> RFA No. <u>2021270429</u> Date of Injury <u>8/23/21</u> Prior PBD Filed: <input type="checkbox"/> Yes <input type="checkbox"/> No Assigned Judge _____

**PETITION FOR BENEFIT
DETERMINATION**

Tennessee Bureau of Workers' Compensation
Court of Workers' Compensation Claims
PBD.CourtClerk@tn.gov
800-332-2667

Applies to injuries on or after July 1, 2014

*(For injuries before July 1, 2014, please use a Request
for Mediation)*

General Information

The Petition for Benefit Determination (PBD) is the form to file with the Bureau of Workers' Compensation to begin the dispute resolution process. The legal process for a workers' compensation claim begins with this filing.

Please see page 5 Helpful Tips and Information before completing this form. Call: 800-332-2667 or [click here](#) for additional help. Information about benefits, laws and procedures is available at www.tn.gov/workerscomp.

If you fail to timely file this form with the Court Clerk, you may be denied benefits. This form must be filed within one year after the accident resulting in injury; one year from the last authorized medical treatment; or one year from the employer's last compensation payment to or on behalf of the employee, whichever is later.

Section A: Identify the people and the companies involved.

Employee Name Thomas Keathley Date of Injury 08/23/2021
SSN [REDACTED] Date of Birth [REDACTED]
Mailing Address [REDACTED]
City [REDACTED] State [REDACTED] ZIP [REDACTED] County [REDACTED]
Phone [REDACTED] Email [REDACTED]

Employee Attorney Mark Lambert BPR #
Address 5978 Knight Arnold Rd. City Memphis
State TN ZIP 38115
Phone (901) 529-1111 Fax (901) 529-1017
Email mlambert@calljmb.com
Office Contact Person Bailey Easley
Email bailey@calljmb.com

Employer(s) JB Hunt Transport Services, Inc.
Phone (901) 541-8142
Mailing Address 4949 Tuggle Rd
City Memphis State TN ZIP 38118 County Shelby
Employer Contact Email

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Employer Attorney _____ BPR # _____
Address _____ City _____ State _____ ZIP _____
Phone _____ Fax _____ Email _____
Office Contact Person _____ Email _____

Insurance Company: ESIS

Third Party Administrator: _____

Ins. Adjuster Name Glenn Parker
Email: glenn.parker@esis.com

Mailing Address P.O. Box 11808
City Richmond State VA ZIP 23230

Phone (800) 830-6823 Fax (804) 346-3721
Ins. Claim# C166C527361X

The Subsequent Injury Fund (SIF) may provide benefits to qualified employees who have a prior permanent physical disability and who become permanently and totally disabled by a later work injury. To preserve a claim against the SIF, Employee must submit this form via fax to 615-741-4169, email to WC.SIFLegal@tn.gov or mail to: SIF Director, Legal Section, 220 French Landing Drive, 3B, Nashville, TN 37243.

Is the Employee seeking recovery from the Subsequent Injury Fund? ☐ YES ☐ NO

SIF Attorney Name (If known): _____

Section B: Provide details about the work injury.
(Attach additional sheets if necessary.)

The date of injury is: 08/23/2021.

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The injured body part(s) is (are): Neck, back, thumb and tingling and numbness in arms and legs.

The place where the injury happened is: Highway 72 in Corinth.

The witnesses to the injury are: several, a main intersection is where it took place.

The injury occurred while the employee was performing the following work activities: _____
Mr. Keathley was driving an 18 wheeler for JB Hunt. He was sitting at a red light when he was rear ended by another 18 wheeler.

The injury was caused by: another driver

Employee reported the injury to the police and Thoma at JB Hunt claims managment on 08/23/2021.

Insert Name.

Insert Date.

Section C: Identify the problem you are having with the workers' compensation claim.

I, Mark A. Lambert, have the following problem:

Insert name. (Attach additional sheets if necessary)

WC has denied treatment for his back injury. The injury to the back and treatment were all caused by and made necessary by the accident.

Section D: Identify the workers' compensation issues that apply to the claim. (Select all that apply.)

Medical Benefits Please include medical records showing the treatment received for the work injury

- ☐ Employee received a list of 3 doctors on _____ and selected _____.
Date Insert Doctor or Clinic Name
- ☐ Employee has not received a list of 3 doctors.
- ☐ Employee has not received medical care from Employer or the insurance company.
- ☐ Employee has not received medical care as required by a court order. (Provide court order.)
- ☒ Employee was denied medical care after receiving it.
- ☐ Employee has not received medical care ordered by the doctor.
- ☒ Employee sought medical care from a physician who was not on the list provided by employer.

* * *

Section E: Indicate Your Availability for Mediation:

Before a judge can decide a dispute about disability or medical benefits, the parties must participate in mediation. A mediator working for the state, without a stake in the outcome, will help the parties reach an

agreement voluntarily. Most disputes are resolved without going before a judge.

Mediations must be scheduled by agreement between the parties. Please contact all parties and indicate the three (3) different agreed upon dates and times below. Please circle the desired time slot. If you do not have an attorney, you can call 800-332-2667 for help with selecting mediation dates.

<u>Nov. 23rd</u>	<u>Nov. 24th</u>	<u>Nov. 30th</u>
9:00 am or 1:00 pm	9:00 am or 1:00 pm	9:00 am or 1:00 pm

*The filing party must check one of the following:

- ☐ The above dates and times have been agreed upon by all parties.
- ☒ I am unable to coordinate dates with the other party; the dates above only show my availability.

Section F: Notice

A case can be lost because this form is not provided to the parties or their attorneys. Please indicate how you sent them a copy of this form. [Click here for an example.](#)

“Service sent to:” means the address, fax number, or email address used to send the form to the other party.

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<input type="checkbox"/> Employee _____	<input type="checkbox"/> Employer(s) <u>JB Hunt</u> <u>Transport Services, Inc.</u>
Service by: <input type="checkbox"/> By Hand	Service by: <input type="checkbox"/> By Hand
<input type="checkbox"/> Mail <input type="checkbox"/> Facsimile	<input type="checkbox"/> Mail <input type="checkbox"/> Facsimile
<input type="checkbox"/> Email	<input type="checkbox"/> Email
Service Sent to: _____	Service Sent to: _____
<input checked="" type="checkbox"/> Employee's Atty <u>Mark A. Lambert</u>	<input type="checkbox"/> Employer(s)' Atty(s) _____
Service by: <input type="checkbox"/> By Hand	Service by: <input type="checkbox"/> By Hand
<input type="checkbox"/> Mail <input type="checkbox"/> Facsimile	<input type="checkbox"/> Mail <input type="checkbox"/> Facsimile
<input checked="" type="checkbox"/> Email	<input type="checkbox"/> Email
Service Sent to: <u>mlambert@calljmb.com</u>	Service Sent to: _____
<input checked="" type="checkbox"/> Carrier(s) <u>ESIS</u>	<input type="checkbox"/> SIF's Atty _____
Service by: <input type="checkbox"/> By Hand	Service by: <input type="checkbox"/> By Hand
<input type="checkbox"/> Mail <input type="checkbox"/> Facsimile	<input type="checkbox"/> Mail <input type="checkbox"/> Facsimile
<input checked="" type="checkbox"/> Email	<input type="checkbox"/> Email
Service Sent to: <u>glenn.parker@esis.com</u>	Service Sent to: _____

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Section G: Certify the information contained in the Petition for Benefit Determination is correct.

I, Mark A. Lambert, state that the information provided in this Petition for Benefit Determination is true and accurate to the best of my knowledge, information, and belief. Further, I certify a copy of the Petition for Benefit Determination has been sent to the parties as described above.

<u>Mark A. Lambert</u>	<u>s/ Mark A. Lambert</u>	<u>11/5/21</u>
Print Name	Signature	Date

* * *

JA-222

[ROA 1885-2380]

IN THE UNITED STATES DISTRICT COURT
FOR THE NORTHERN DISTRICT OF MISSISSIPPI
OXFORD DIVISION

THOMAS KEATHLEY,

Plaintiff,

vs.

NO. 3:21cv261-MPM-RP

BUDDY AYERS CONSTRUCTION, INC.,
and DAVID FOWLER, Individually,
and as an Employee, Agent, and/or
Servant of BUDDY AYERS CONSTRUCTION, INC.
Defendants.

DEPOSITION
OF
THOMAS KEATHLEY

APRIL 21, 2023

[2] The deposition of THOMAS KEATHLEY is taken on behalf of the Defendants, on this the 21st day of April, 2023, pursuant to notice and consent of counsel, beginning at approximately 8:30 a.m. in the offices of Perry Griffin, P.C., 5699 Getwell Road, Building G5, Southaven, Mississippi.

This deposition is taken pursuant to the terms and provisions of the Mississippi Rules of Federal Procedure.

All forms and formalities, including the signature of the witness, are waived and objections alone as to matters of competency, relevancy and materiality of the testimony are reserved, to be presented and

disposed of at or before the hearing. Objections as to the form of the question must be made at the taking of the deposition.

* * *

[14] A It's a cell phone.

Q Okay. Do you have any other numbers or is that your only tele --

A No. That's my only telephone.

Q Okay. I'm going to ask you a few questions, events, getting a sequence, and some of the questions I'm going to ask you have to do with when you contacted lawyers. Now, I don't want you to tell me the things y'all discussed, because that would be protected by the attorney-client privilege, but just, you know, when you contacted somebody, why you contacted them, you can answer those questions. And Mr. Lewellyn is sitting here, and he'll stop you if he doesn't want you to go further; okay?

A Yes.

Q Okay. When did you first contact or call an attorney to represent you in this case?

A August the 23rd.

Q The day of the accident?

A I did.

Q Okay. Who did you call?

A Austin Alders.

Q Okay. And why did you call Austin?

[15] A Well, my son called -- we were talking about me going to the emergency room because that's where I was headed.

Q Okay.

A He said he knew somebody that was a friend of his that Austin had representative -- represented.

Q Okay.

A And so Austin called me and we talked and he felt like I needed to go to the emergency room, which we discussed that that's the best thing for me to do at that point.

Q Okay. So you said Austin called you? How did he know to call you?

A My son called his friend and then they called him.

Q Okay. And what's your son's name?

A Jonathan Blake Keathley.

Q Jonathan Blake Keathley?

A Yes.

Q Okay. And do you have another son?

A I do.

Q That's Thomas, Junior?

A It is.

Q Okay. Thomas Keathley, Junior, okay. And I [16] assume Thomas is the older brother?

A Yes.

Q Okay. How old are --

A Oldest son.

Q Oldest son. I meant brother to Jonathan. I'm sorry. How old is Jonathan?

A He's 40 -- 85 -- 15 -- 40.

Q Okay. And how old is Thomas?

A Forty-six.

Q Okay. Do you have any daughters?

A I do not.

Q Okay. These are your only two children?

A Yes.

Q Okay. Who is the friend of your son's that had been represented by Mr. Alders before?

A I do not know.

Q Okay. Where were you when you had this conversation with your son and he told you he knew somebody?

A McDonald's.

Q I'm sorry, McDonald's?

A (Witness nodding head affirmatively.)

Q So was this after you had left the accident scene and already gotten home or --

[17] A Yes.

Q McDonald's in Marion?

A West Memphis.

Q West Memphis, okay. Do you know about what time of day that was?

A Around 7:00.

Q Okay. Okay. And Mr. Lewellyn that's here with you today, he's in that same firm with Austin Alders, isn't he?

A That's correct.

Q Okay. How many times has Mr. Alders either loaned you money or helped you get a loan since he's been representing you in this case?

A Three times.

Q Okay. Tell me about those starting with the first one.

MR. LEWELLYN: Just for clarification, don't discuss anything that you've discussed with counsel or that he discussed with you.

Q (By Ms. Dearman) Well, nothing about this lawsuit. But I do need to know about -- did he loan you money personally or did he help you secure a loan?

A No. I don't know where he got it. He gave **[18]** me money.

Q Three different times?

A Yes.

Q Okay. How much did he give you the first time?

A Fifteen.

Q 1,500?

A Yes.

Q Okay. And what about the second time?

A A thousand.

Q What about the third time?

A And I believe the last one was a thousand.

Q Okay. How long ago was the last one?

A He got it from a loan company.

Q The last one or --

A I --

Q -- all of them?

A What's that?

Q The last one or all of them?

A All of them.

Q From a loan company? What loan company?

A I do not know.

Q Did you have to sign any paperwork?

A I did.

[19] Q So you signed the paperwork, but you don't know who the loan is with?

A I do not.

MS. DEARMAN: Okay. We're going to need that produced, please.

MR. LEWELLYN: I don't think it's relevant.

MS. DEARMAN: Well, I think it is, so --

MR. LEWELLYN: Okay.

MS. DEARMAN: We can take it up with the judge if we need to.

Q (By Ms. Dearman) So did you sign a note to pay these loans back?

A I did.

Q Okay. Have you paid anything back on these loans?

A I couldn't and I have not.

Q So that's no? Okay. Do you anticipate borrowing any more money through Mr. Alders?

A No.

Q Do you understand that if Mr. Alders lent it to you personally out of his pocket, that would be unethical and he would -- not supposed to do that as a lawyer to a client?

[20] A I do.

Q Okay.

MR. LEWELLYN: I also want to clarify that that did not happen.

MS. DEARMAN: Okay.

MR. LEWELLYN: It was a loan company that loaned --

MS. DEARMAN: Okay.

MR. LEWELLYN: -- Mr. Keathley the money that Mr. Alders put him in touch with.

Q (By Ms. Dearman) Okay. Well, did you talk to the loan company yourself?

A No.

MS. DEARMAN: Okay. Do you know who the -- do you want to tell us who the loan company is or do you want us to do --

MR. LEWELLYN: I don't know off the top of my head.

Q (By Ms. Dearman) Okay. Is -- Mr. Alders, does he own or have any ownership in the loan company to your knowledge?

A I do not know.

Q Okay. Has any other lawyer in this case, either Mr. Lewellyn or Mr. Greer loaned or helped

* * *

[22] (Whereupon, Exhibit Numbers 1 and 2 were marked to the testimony of the witness.)

Q (By Ms. Dearman) You -- and you can just keep those in front of you because we'll be using those a lot today. Okay. I mentioned the name Mark Lambert, but for the record, who is Mark Lambert?

A He was a workmen's comp lawyer.

Q Okay. He was representing you in your workers' comp --

A Yes.

Q -- claim that's related to this accident?

A Yes.

Q Okay. Is that claim -- is that case still ongoing?

A No.

Q Okay. Tell me how that was resolved.

A With a settlement.

Q When was it resolved?

A Maybe November. I'm not sure about the date.

Q Okay. In 2022?

A I think.

[23] Q Okay. And what was the amount of the settlement?

A It was, like, eighteen-three.

Q \$18,300?

A Uh-huh.

Q And was that for your personal injuries?

A Yes.

Q Okay. Did it --

MR. LEWELLYN: Objection to the form of the question. Sorry.

MS. DEARMAN: That was --

MR. LEWELLYN: The workers' compensation claim is not for personal injury, but --

MS. DEARMAN: Oh, okay. I'm sorry. Well, it does compensate for injuries in some form or fashion for a disability or something he sustained. Is that wrong?

MR. LEWELLYN: That's accurate.

MS. DEARMAN: Okay.

Q (By Ms. Dearman) What did you understand that the 18,300 was for, Mr. Keathley?

A To take care of the injuries that I sustained.

Q Which injuries?

[24] A The hand.

Q The hand? And you're pointing to your right hand?

A I did.

Q Okay. Does that -- and that's a lump sum amount, the 18,300?

A Yes.

Q Okay. And was that only with regard to the right hand?

A Yes.

Q Okay. And I understand that the injuries to the right hand were -- you had, let me see if I get this

right, an ulnar collateral ligament injury to the right thumb? Am I saying that right?

A The steering wheel ripped my fingers through here (indicating).

Q Okay. But my question is what kind of injury was it? Is it a -- it was a torn ligament?

A Yes, it was.

Q And you were pointing. Was -- were you pointing to the space between your thumb finger and your --

A That's correct.

[25] Q -- pointer finger? Okay. And then you also had carpal tunnel in the right wrist?

A Yes.

Q Okay. And you've had surgeries on both of those; correct?

A Yes.

Q Okay. Dr. Cole performed those?

A Yes.

Q Okay. Have you had any other surgeries related to this accident?

A No.

Q Okay. Is Mark Lambert also representing you with regard to the bankruptcy case you filed on December 27, 2019?

A No.

Q Who's representing you in that bankruptcy?

A Bart Ziegenhorn.

Q Is he the --

A Excuse me.

Q I'm sorry, Zieger --

A Ziegenhorn.

Q Ziegenhorn? Is he the same attorney that's represented you in all four of your bankruptcies?

A No.

[26] Q Okay. Well, we'll talk about him in a second then. The December 27, 2019 bankruptcy you filed, that's still ongoing, isn't it?

A Yes.

Q Okay. We marked and I handed to you two exhibits. I want you to look at those and tell me if you can identify those and tell me if you recognize those.

A Yes.

Q Okay. And for the record, just state what those appear to be.

A Yes.

Q And can you describe those generally for the record? What are you holding?

A It was a daily diary that I kept --

Q Okay. And --

A -- from the time the accident happened up until --

Q Okay. Are you still keeping it?

A No.

Q Okay. When did you quit keeping it?

A Not sure of the date.

Q Okay. Well, when you were here for Mr. Fowler's deposition, you had a notebook with

* * *

[55] A Yes.

MR. LEWELLYN: Okay. Let's take a break.

THE VIDEOGRAPHER: All right. We're off record.

(Brief recess.)

THE VIDEOGRAPHER: All right. We're back on record.

Q (By Ms. Dearman) Okay. Before the break, Mr. Keathley, we were talking about the two jobs you applied for, and I believe you told me Family Dollar and C.R. England. Is that correct?

A Yes.

Q Okay. And what does C.R. England do?

A It's a trucking company.

Q Okay. And I believe you told me they're based out of Salt Lake City, Utah?

A That's correct.

Q Okay. Let's look at your interrogatories or responses again, that was Exhibit 3, and we'll go back to Page 13 again. And in response to the question number 17 about your employment history, you only listed three different employments there. What -- what were those three that you listed?

[56] A Landers Nissan, J.B. Hunt, and Wal-Mart.

Q Okay. Why didn't you list C.R. England?

A I wasn't there long enough. I just forgot.

Q You just forgot about it? Okay.

A Yeah.

Q That's fine. So you were just there a short period of time?

A For school.

Q Okay. You went to truck driving school there?

A That's right.

Q Okay. And did you actually have to go to -- out to Salt Lake to --

A I did.

Q -- do the school? Okay. How long did the school last?

A It was a week.

Q Okay. And how --

A Well, that --

Q I'm sorry.

A It was a week in class.

Q Okay.

A And then the rest of it was on the road for a month.

[57] Q Okay. So the -- so the driving for a month was part of the course?

A That's correct.

Q Okay. And was that driving also in Salt Lake City or the Utah area?

A Wherever they would send us.

Q Okay. But in Utah?

A Not just in Salt Lake City. We drove other places.

Q Within the state or did you leave the state?

A We left the state.

Q Okay. During that time period, were -- you weren't driving as far as your home in Marion, were you?

A Yes, I was.

Q You were?

A Uh-huh.

Q Okay. So give me an idea of the geographical area that you were covering during that time period.

A Wyoming, Arizona, Oklahoma, I think we went as far almost to Ohio.

Q Okay.

A And we'd come down here as far as Memphis, [58] and then we would turn around and go back.

Q Wow.

A The idea of the schooling was that when you did the in-class, the rest of it to finish, for you to be graduated, you had to drive the truck, so we did it as a group. There was two of us in the truck --

Q Okay.

A -- along with a trainer.

Q Okay.

A So that was -- that was the gist of it. It was just the training in order to be -- for -- to get blessed to get my CDL.

Q Okay. Did you -- after you finished that training period, did you continue to drive for a period for C.R. England?

A I did not.

Q Okay. But they paid you, at least during that driving period, didn't they?

A Oh, yeah.

Q Okay. And that was, I believe, you read for us off the W-2 --

A It was a small amount.

Q Okay.

* * *

[64] A And -- excuse me. And then I was -- I'd work off -- work four, off three days.

Q Okay.

A So it was a lot better life for us.

Q Okay. The truck driving course that you took at C.R. England, how much did that course cost?

A 69 hundred and something dollars.

Q Okay. And did you finance the cost of that?

A I did.

Q Was that through C.R. England?

A No. It's through some company. I can't remember what the name of it is.

Q Okay. Did it qualify kind of like a student loan would?

A No.

Q Let's look at that and see where my C.R. England records are.

MS. DEARMAN: Is this 12, Samantha?

THE COURT REPORTER: Yes.

MS. DEARMAN: Okay. We'll give it to Mr. Lewellyn first. He'll want to --

(Whereupon, Exhibit Number 12
was marked to the testimony of
the **[65]** witness)

A So are we finished with 13, Exhibit 7?

Q (By Ms. Dearman) For now.

A Or 3?

Q Okay.

A Okay.

Q What I've just handed you has been marked Exhibit 12, and these are employment records I obtained from C.R. England, and you see on the front is your driver application and it goes over several pages. I want to find the information about the course, see if I can tell you. If you -- at the bottom, there's Bates stamped numbers on this document too, kind of in small numbers, bottom right. Do you see that? It begins TKEITH and it's got a dash and some numbers.

A Yes.

Q Okay. Turn to Page 142 with me. Do you see -- what's -- what does it say at the top of that page?

A Loan interest rate and fees.

Q Okay. And I believe you said it was 6,900, but I think it was more -- about a thousand **[66]** dollars less. Look at where it says the amount provided and tell me what that amount is.

A Well, the reason it has interest on it is because I never paid it.

Q No, I'm talking about the principal amount.

A 5,995.

Q Okay. And what was the interest rate?

A Eighteen-nine.

Q Okay. And it was a five-year loan?

A I have no idea.

Q Okay. Well, look down in the next block where it talks about loan program. Do you see that?

A Yes.

Q Okay. And there's a column to the left. What does that first thing indicate on the column to the left? What does it say?

A Perkins for students.

Q Okay. And what does the next entry say under that?

A Stafford for students.

Q Okay. And then look over to the right and it's got some more things listed where it starts undergraduate.

[67] A Undergraduate.

Q Okay.

A Undergraduate.

Q What does that say, undergraduate --

A Subsidized.

Q Okay. And then under that?

A Subsidized and graduate.

Q Okay. And under that?

A Federal family education loan.

Q Okay. After looking at this, would you agree that this is like a student loan?

A I do not know.

Q Okay. Okay. You said you never paid it off. Tell me what happened about that.

A I couldn't afford it.

Q Okay. It was financed -- well, look on the page we're looking at, and it tells you the term of your loan, and tell me how long it was financed. It's in the block out by the interest rate. Do you see that 18.99 percent?

A Yes.

Q Okay. And what's the loan period next to that?

A Five years beginning with your date of your [68] loan.

Q Okay. And if you turn over two pages, there's a blank page for some reason in the middle of mine, and then the page after that, you -- did you have a blank page too? Okay. If you look down a little bit, it's got the total loan amount again, and then you skip down to where it says estimate -- estimated repayment schedule and terms. Do you see that?

A Yes.

Q Okay. And it says the loan term, and what does it say there?

A Sixty months.

Q And that would have been the five years; correct?

A Correct.

Q Okay. And what would your monthly payments have been?

A 155.48.

Q Okay. And you didn't make any of those payments?

A I did not.

Q Okay. Go back to the first page we were looking at a couple pages back. If you had paid **[69]** that loan off with monthly payments and you took the whole five years to pay it, what would you have paid principal, including interest, at the end of that time?

A \$9,322 and -- or 28.80.

MS. DEARMAN: Okay. Okay. Let me get some more documents. I need to mark these next two, please.

MR. LEWELLYN: What are these?

MS. DEARMAN: These are docket sheets from bankruptcies or -- from the 2019 bankruptcy, and then there is a schedule.

(Whereupon, Exhibit Numbers 13 and 14 were marked to the testimony of the witness.)

MS. DEARMAN: Okay. And I'm sorry, Samantha, remind me -- we marked the schedule as Exhibit 13?

THE COURT REPORTER: Yes.

Q (By Ms. Dearman) Okay. So that is the -- the docket sheet, excuse me, the docket sheet from the bankruptcy case you filed on December 27, 2019, and then the next document, Exhibit 14, is a **[70]** summary of your assets and liabilities that you filed in connection with that bankruptcy. Do you see those two documents?

A I do.

Q Okay. Do you recognize those to be the docket sheet from your bankruptcy case, Exhibit 13?

A Yes.

Q Okay. Do you recognize Exhibit 14 to be one of the forms that was filed with your petition called a summary of assets and liabilities?

A Yes.

Q Okay. Turn with me to the second page of that schedule.

A Which schedule?

MR. LEWELLYN: Is that 14?

MS. DEARMAN: 14.

Q (By Ms. Dearman) Okay. And you see under question 9, they're asking for special categories of claims against your bankruptcy estate.

A Uh-huh.

Q What does line 9D say?

A Line B?

Q 9D.

[71] A There's zero on line D.

Q Well, read out to me what it says right after 9D.

A Student loans.

Q Okay. And then the total claim you put zero?

A That's what he put.

Q Okay. Turn to the next page. We have a schedule called Schedule E/F, Creditors Who Have Unsecured Claims. Do you see that?

A I do.

Q Okay. Turn to the second page of that schedule and look down under Part 4 at the bottom.

And do you see that's asking --

MR. LEWELLYN: What page are we on?
Sorry.

MS. DEARMAN: Page -- Page 2 of the Schedule E/F on -- at the top it says Page 21 out of 46 of the filed bankruptcy docket number. Do you see where I'm -- up here, the --

MR. LEWELLYN: I thought you said 21 and 46.

MS. DEARMAN: 21 out of 46, it says.

Q (By Ms. Dearman) Okay. Do you see Part 4 down at the bottom?

[72] A Yes.

Q Okay. And what is the statement out by Part 4 asking you to do?

A It's asking me to do something?

Q Well, what -- what -- read the title for Part 4.

A Add the amounts for each type of unsecured claim.

Q Okay. And down -- look at Line 6F and tell me what kind of unsecured claim that's supposed to be.

A It says student loan.

Q Okay. And what's the amount out towards that?

A Zero.

Q Okay. So would it be a true statement that the loan that you took out for the truck driving course you never disclosed in this bankruptcy court case that you've got ongoing?

A I did not know it was a student loan.

Q Okay. Well, did you list it anywhere as a creditor in this bankruptcy?

A I did not.

Q Why is that?

[73] A I didn't know.

Q You didn't know it was a creditor that you had never paid back?

A Never thought about it when we filed.

Q Okay. And you filed way back on December 27, 2019. Is that correct?

A Yes.

Q Okay. There were other things that -- since this accident was filed that you didn't let your bankruptcy court know about too, weren't there? For instance, this lawsuit.

A Did I let them know about it? Yes, I did.

Q You let the bankruptcy court know about -- I'm not talking about after we moved for summary judgment and you gave the affidavit.

A No, ma'am.

Q So --

A They knew about it.

Q And now my question to you is, before March 30, 2023, did you ever let the bankruptcy court know that you had sustained personal injuries and you were making a claim for it?

A Yes.

Q You let the -- who did you talk to at the [74] bankruptcy court?

A Bart Ziegenhorn.

Q Okay. That's not the bankruptcy court.

That's your attorney; correct?

A Yes, Austin Alders.

Q Okay. He's with Austin too?

A No. Bart Ziegenhorn is my bankruptcy attorney.

Q Okay.

A Austin Alders is for this personal injury.

Q Okay. So who did you tell -- did you tell --

A I told both of them.

Q You told both of them?

A I did.

Q Okay. But you never communicated with the Court, did you?

A No, ma'am.

Q Okay. And you didn't file any document or sign any document with the Court about having that personal injury claim, did you?

A I did not.

Q Okay. And by this time when you had filed this bankruptcy in December of 2019, this was your fourth bankruptcy, wasn't it?

[75] A I believe it was three, but it could be four.

Q Okay. Well, let's look at those.

A But if you say four, I'm good with it.

Q Well, we're going to go ahead and look at them.

MS. DEARMAN: Let's mark these next three exhibits, please. And I don't know what number we're on. 15?

THE COURT REPORTER: 15.

MS. DEARMAN: Okay. 15 is going to be the docket sheet for the bankruptcy you filed on July 31, 2001. 16 will be the docket sheet for the 2003 bankruptcy. 17 will be the docket sheet for the 2015 bankruptcy.

(Whereupon, Exhibit Numbers
15, 16, and 17 were marked to the
testimony of the witness.)

Q (By Ms. Dearman) Okay. I've handed you three documents. Look at the one that's been marked Exhibit 15 and identify that for me, please.

A U.S. Bankruptcy Court.

[76] Q Okay. And over to the left where it says debtor, do you see your name?

A I do.

Q Do you also see your wife's name?

A I do.

Q To the right where it says date filed, what does it say?

A 7/31 of 2001.

Q Okay. And over to the left, it tells what kind of bankruptcy that was. What kind of bankruptcy was that?

A Chapter 7.

Q Okay. Do you know the difference between a Chapter 7 and a Chapter 13 bankruptcy?

A Not in detail.

Q Okay. Well, what is your understanding of the difference?

A You pay back on the 13 and the 7 finalizes everything.

Q Okay. So a 13 is like a plan that you pay back over a period of time to try to pay off your debts. Is that correct?

A That's correct.

Q Okay. And then a 7, a Chapter 7 is when you [77] get the debts discharged so you do not pay back. Is that correct?

A That's correct.

Q Okay. So in 2001, the debts you discharged under a Chapter 7, you never paid those back, did you? Well, I mean, your -- it says discharged.

Did you get the discharge in bankruptcy?

A Yes.

Q Okay. So that means whatever creditors that you had told the bankruptcy court about, those were discharged and let go at that point; right?

A According to this.

Q At the date of discharge? Okay. Look at Exhibit Number 16 and tell me what that is.

A U.S. Bankruptcy Court.

Q Okay. What's the date, date filed?

A 8/7 of 2003.

Q Okay. And who are the debtors listed on this bank -- the second bankruptcy?

A Myself and my wife.

Q Okay. And what kind of bankruptcy was this?

A Thirteen.

Q Okay. What does it say the discharge date was?

[78] A 1/7 of 2009.

Q Okay. And I guess that kind of explains what you were talking to me about where you have a period of time in a Chapter 13 to pay this off. Is that why it lasted from 2003 to 2009, you were making payments over that six-year period?

A I believe so.

Q Okay. And that was finally closed and that case was finished; correct?

A Yes.

Q Okay. Look at number -- Exhibit 17 and tell me what that is.

A U.S. Bankruptcy Court.

Q Okay. And who are the debtors on this one?

A Myself and my wife.

Q Okay. What was the date it was filed?

A 3/11 of 2015.

Q Okay. And what was it filed as?

A Chapter 7.

Q Okay. Well, look under that. What does it say under that?

A Previous Chapter 13, original Chapter 13.

Q Okay. And then over to the right, you see something that says date converted?

[79] A Yes.

Q Okay. So would it be true that you filed this as a 13, but you ended up converting it to a Chapter 7 according to that information?

A Filed as a 7 and --

Q I'm sorry?

A Converted it to a 13?

Q Yeah, I'm asking.

A Okay. I got what you're saying. Okay.

Q I'm -- no. It was filed as a 13 and converted to a 7. Do you see that?

A Yes.

Q Okay. Is that how you recall that being done?

A Yes.

Q Okay. And then we have the 2019 bankruptcy we've already talked about, so that's four bankruptcies; correct?

A Yes.

Q Okay. And so through four bankruptcies, you knew that you were supposed to list creditors in each of your -- in your bankruptcies, weren't you?

A Yes.

Q Okay. Okay. Let's talk about your next

* * *

[328] start with a written coaching and then you go up through the levels; write-up, second write-up, third write-up, fourth you're out.

Q Okay. Was there -- were there some verbal warnings that came before the --

A No, that was a -- clearly a --

Q Just a first write-up was your first -- okay.

A Yeah.

Q Okay. Okay. And then we talked about earlier the -- your bankruptcies a couple times, and one of the ones that we've addressed is the current one, the 2019 one. Did you ever report your workers' comp settlement in that Bankruptcy Court proceeding, the workers' comp settlement you just had last year?

A What do you mean report?

Q Did you disclose that as an asset to the Bankruptcy Court?

A No.

Q Okay. The personal loans that we've talked about that Mr. Alders helped you get, the three different loans, did you get approval from the Bankruptcy Court to get those loans and sign more notes?

[329] A (Witness shaking head negatively.)

Q I'm sorry, you've got to say it out loud.

A I don't know what you mean by that. We didn't have food on the table, so he was giving me money through a financial institution for us to eat.

Q Okay. I understand that, Mr. Keathley. My question was, was there any request from the Bankruptcy Court to allow you to acquire a loan when you were already in bankruptcy?

A I didn't feel like I had to go through the Bankruptcy to do that.

Q Okay. Did you ever tell the Bankruptcy Court that you had acquired those three new debts?

A No, because it was in this lawsuit.

Q Well, aren't you supposed to disclose when you're in bankruptcy, active bankruptcy, paying a plan to let them know every --

A I don't know --

Q -- time you get --

A -- that.

Q -- an asset or --

A I don't know that. I'm not a lawyer.

Q Okay. But you --

[330] A I didn't know I had to tell anybody about that.

Q After being in bankruptcy four different times, you didn't understand that you're supposed to let them know how your financial situation changes during the course of paying on a plan?

A I don't know -- I don't know how you want me to answer that question because when you're in bankruptcy, you file it, and then you go all the way until you're dismissed and you follow all the mailing you get and all that of what's going on with it, but you don't ever go back and just see your lawyer every day and talk to him and --

Q Well, maybe you didn't understand this, but do you understand that if your financial situation changes after you've filed your petition --

A But that's not a financial -- that's not a change. That's a loan for --

Q Well, go ahead. I don't want to cut you off.

A No, you go ahead.

Q I was just going to say, aren't you supposed to give them a list of all of your creditors? Because creditors

get notices and an opportunity to object to plans and stuff.

[331] A I don't know how that works on that. I know when it first -- then -- when I put in there that I owed these two people or two institutions for money that it was put in there.

Q Okay.

A And then during the course of all of this, you know, I -- I asked to get some help so that we could eat.

Q Okay. So it would be fair to say to your knowledge --

A So I reported through my bankruptcy lawyer and through these folks that I was in bankruptcy. That's all I was supposed to do. I'm not a lawyer. I don't need to know how to write it up or do anything else.

Q You know -- okay. I understand. And I'm not trying to argue with you or really get into your reasons. My only question is, just to confirm and make sure I understand, to your knowledge, the Bankruptcy Court has never been apprised of these three personal loans that you got during this lawsuit, have they?

A No.

Q Okay. Okay. Have you ever been convicted of

* * *

JA-249

[ROA 2383-84]

From: Bart Ziegenhorn bart@szblaw.com
Subject: RE: Thomas Keathley
Date: April 4, 2023 at 9:27 AM
To: Austin L. Alders
austin.alders@aldersandlewellyn.com
Cc: Eric Lewellyn
eric.lewellyn@aldersandlewellyn.com,
Thomas Greer tgreer@BaileyGreer.com

Attached please find bankruptcy history regarding amendments. These are downloaded Pacer.

I amended upon Trustee's Motion regarding an arrearage. I recall him telling me at that time that he had been in a car accident and didn't know when he would start to work. I amended the Plan. However, I failed to check the payment to unsecured 100%. Trustee objected to that due to amount of property. I amended to unsecured creditors are paid 100%. He has been in compliance with payments since that time.

I need your employment contract to file with Motion. I am amending assets in the next hour.

Bart Ziegenhorn
Attorney at Law
P. O. Box 830
West Memphis, AR 72303
870-732-9100
bart@szblaw.com

This electronic transmission may contain information which is confidential and privileged and may be

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subject to the Attorney-client Privilege and may also constitute Attorney Work Product.

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From: Austin L. Alders [mailto:austin.alders@aldersandlewellyn.com]
Sent: Tuesday, April 4, 2023 8:38 AM
To: bart@szblaw.com
Cc: Eric Lewellyn
<eric.lewellyn@aldersandlewellyn.com>, Thomas Greer <tgreer@BaileyGreer.com>
Subject: Thomas Keathley

Bart,

Please find attached the Complaint and Summons for Mr. Keathley. Please let us know what else we need to do.

JA-251

Sincerely,

PLEASE NOTE THAT OUR ADDRESS HAS
CHANGED AND IS NOW AS FOLLOWS:

Austin L. Alders Esq. (034843)

ALDERS and LEWELLYN, PLLC

p: 9016025700 f: 901328-1378

a: 1331 Union Avenue, Suite 1000, Memphis,
Tennessee 38104

w: aldersandlewellyn.com

Ch. 13 Docs.pdf

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[ROA 2385-87]

IN THE UNITED STATES DISTRICT COURT
FOR THE NORTHERN DISTRICT OF MISSISSIPPI
OXFORD DIVISION

THOMAS KEATHLEY,

Plaintiff,

CIVIL ACTION NO.:

3:21-CV-261-MPM-RP

v.

BUDDY AYERS

CONSTRUCTION, INC.,

Defendant.

AFFIDAVIT OF KELLIE M. EMERSON

STATE OF ARKANSAS

COUNTY OF PULASKI

Personally appeared before me, the undersigned authority, Kellie M. Emerson, after being first duly sworn makes oath and states:

1. I, Kellie M. Emerson, am an adult resident of Pulaski County, Arkansas, over the age of eighteen, and otherwise competent to execute this Affidavit.
2. I have personal knowledge of the facts recited in this Affidavit.
3. I am a staff attorney for the office of Mark T. McCarty, a Chapter 13 Trustee for the Eastern and Western Districts of Arkansas.
4. Thomas Keathley and Connie Keathley are debtors in a Chapter 13 bankruptcy proceeding in the United State Bankruptcy Court for the Eastern District of Arkansas.

5. Mr. and Mrs. Keathley's bankruptcy is in the Eighth Circuit Court of Appeals of the United States.

6. Mr. And Mrs. Keathley's bankruptcy is proceeding under case number 2:19-bk-16848.

7. The current payoff amount of Mr. And Mrs. Keathley's debts is \$5,691.06 through the end of August 2023.

8. I am the staff attorney assigned to Mr. and Mrs. Keathley's bankruptcy.

9. Throughout the duration of their bankruptcy, I have communicated with Mr. and Mrs. Keathley directly and through their attorney, Bart Ziegenhorn.

10. Over the course of the communications, I am unaware of Mr. Keathley, Mrs. Keathley, and Mr. Ziegenhorn having lied or made any misrepresentations to me.

11. Furthermore, there is nothing unusual or misleading about Mr. and Mrs Keathley not disclosing the personal injury action while the personal injury action is ongoing.

12. In the Eastern District of Arkansas, it is not uncommon for debtors to amend their bankruptcy filings to disclose post-petition claims for personal injury actions prior to the settlement or resolution of the personal injury action.

13. Even if Mr. and Mrs. Keathley had notified the bankruptcy court of the personal injury claim immediately after the wreck of August 23, 2021, it would not have had any effect on the administration of the bankruptcy as the bankruptcy case will pay 100% to creditors.

14. Even if Mr. and Mrs. Keathley had notified the bankruptcy court of the personal injury claim immediately after the wreck of August 23, 2021, it would not have had any impact on the amount the Keathleys would have had to pay or the time they would have had to pay it.

15. Mr. and Mrs. Keathley have received no benefit from the non-disclosure of the personal injury claim in the bankruptcy case.

16. It would be in the best interests of the bankruptcy estate and the Keathley's creditors if Mr. Keathley's personal injury action were allowed to proceed as it could possibly result in creditors being paid in full in a more timely manner.

FURTHER AFFIANT SAITH NOT.

s/ K. Emerson

Kellie M. Emerson

SWORN TO AND SUBSCRIBED BEFORE ME,
the undersigned authority, this the 17th day of
August, 2023.

My commission expires: 4-06-2028

s/ Barry Beck

Notary Public

[notary seal omitted]

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[ROA 2560-69]

DebtEd, Repeat, MDSM

U.S. Bankruptcy Court
Eastern District of Arkansas (Delta Division)
Bankruptcy Petition #: 2:19-bk-16848

Date filed: 12/27/2019

Assigned to: Judge
Phyllis M. Jones
Chapter 13
Voluntary
Asset

Plan confirmed: 07/20/2022

Deadline for filing claims:
03/06/2020

Deadline for filing claims
(govt.): 06/24/2020

Debtor

**Thomas Lee Keathley,
Sr.**
511 Apperson Dr.
Marion, AR 72364
CRITTENDEN-AR
SSN / ITIN:
xxx-xx-9586

represented by
Bart Ziegenhorn
Attorney at Law
P.O. Box 830
West Memphis, AR
72301
(870) 732-9100
Fax: (870) 732-9105
Email:
bart@szblaw.com

Joint Debtor

Connie Irene Keathley
511 Apperson Dr.
Marion, AR 72364
CRITTENDEN-AR
SSN / ITIN:
xxx-xx-1636

represented by
Bart Ziegenhorn
(See above for address)

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Trustee

Mark T. McCarty

Chapter 13 Standing

Trustee

Line 1: 877-951-7471

code4545532

Line 2: 877-692-1036

code7210329

P.O. Box 5006

N. Little Rock, AR

72119-5006

501-374-1572

U.S. Trustee

U.S. Trustee (ust)

Office Of U. S. Trustee

200 W. Capitol, Ste. 1200

Little Rock, AR 72201

501-324-7357

Filing Date	#	Docket Text
12/27/2019	<u>1</u> (46 pgs)	Chapter 13 Voluntary Petition. Fee Amount \$310 Filed by Thomas Lee Keathley Sr., Connie Irene Keathley. (Ziegenhorn, Bart) (Entered: 12/27/2019)

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12/27/2019	<u>2</u> (1 pg)	Application for Compensation Filed by Bart Ziegenhorn [illegible] Connie Irene Keathley, Thomas Lee Keathley Sr. (Entered: 12/27/2019)
12/27/2019	<u>3</u> (1 pg)	Credit Counseling Certificate Filed by Bart Ziegenhorn on behalf of Debtor Thomas Lee Keathley Sr. (Ziegenhorn, Bart) (Entered: 12/27/2019)
12/27/2019	<u>4</u> (1 pg)	Credit Counseling Certificate Filed by Bart Ziegenhorn on behalf of Joint Debtor Connie Irene Keathley (Ziegenhorn, Bart) (Entered: 12/27/2019)
12/27/2019	<u>5</u> (9 pgs)	Chapter 13 Plan With Notice of Opportunity to Object/Respond. Filed by Bart Ziegenhorn on behalf of Joint Debtor Connie Irene Keathley, Debtor Thomas Lee Keathley Sr. (Ziegenhorn, Bart) (Entered: 12/27/2019)
12/27/2019	6	RECEIPT of Voluntary Petition (Chapter 13)(2:l 9-bk-16848) [misc,volp 13a] (310.00) Filing Fee. receipt number 14007811, amount

JA-258

		\$ 310.00. (U.S. Treasury) (Entered: 12/27/2019)
12/28/2019	<u>7</u> (3 pgs; 2 docs)	Meeting of Creditors with 341(a) meeting to be held on 02/05/2020 at 12:30 PM at Helena First Meeting Room. Last day to oppose dischargeability is 04/05/2020. Proof of Claim due by 03/06/2020. (admin,) (Entered: 12/28/2019)
12/30/2019		Clerk's Evidence of Repeat Filings for joint debtors Thomas Lee Keathley, Sr. and Connie Irene Keathley Case Number <u>03-19383</u> , Chapter 13 filed in Arkansas Eastern Bankruptcy Court on 08/07/2003 , Standard Discharge on 01/07/2009; Case Number <u>03-19383</u> , Chapter 13 filed in Arkansas Eastern Bankruptcy Court on 08/07/2003; Case Number <u>01-31512</u> , Chapter 7 filed in Arkansas Eastern Bankruptcy Court on 07/31/2001 , Standard Discharge on 11/16/2001; Case Number <u>15-11143</u> , Chapter 7 filed in Arkansas Eastern

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		Bankruptcy Court on 03/11/2015 , Standard Discharge on 12/28/2018.(Admin) (Entered: 12/30/2019)
12/30/2019	<u>8</u> (1 pg)	Order to Pay Trustee (emccarty) (Entered: 12/30/2019)
01/01/2020	<u>9</u> (3 pgs)	BNC Certificate of Mailing - Meeting of Creditors(RE: related document(s) <u>7</u> Meeting of Creditors with 341(a) meeting to be held on 02/05/2020 at 12:30 PM at Helena First Meeting Room. Last day to oppose dischargeability is 04/05/2020. Proof of Claim due by 03/06/2020. (admin,)) No. of Notices: 2. Notice Date 01/01 /2020. (Admin.) (Entered: 01/01/2020)
01/16/2020	<u>10</u> (2 pgs)	Notice of Appearance and Request for Notice Filed by Frederic J. DiSpigna Creditor First Guaranty Mortgage Corporation (DiSpigna, Frederic) (Entered: 01/16/2020)
01/16/2020	11	Request by Rushmore Loan Management Services as servicing agent for First Guaranty Mortgage Corporation Designating

		Mailing Address for Notices pursuant to Bankruptcy Rule 2002(g)(1), requesting service of copies of all future notices at the address specified in the process of filing this Request filed by Christopher K. Baxter Creditor Rushmore Loan Management Services as servicing agent for First Guaranty Mortgage Corporation. (Baxter, Christopher) (Entered: 01/16/2020)
01/29/2020	<u>12</u> (3 pgs)	Objection to Confirmation of Plan Filed by Christopher K. Baxter on behalf of Creditor Rushmore Loan Management Services (Baxter, Christopher) (Entered: 01/29/2020)
01/29/2020	<u>13</u> (2 pgs; 2 docs)	HEARING SCHEDULED (RE: related document(s) <u>12</u> Objection to Confirmation of Plan Filed by Christopher K. Baxter on behalf of Creditor Rushmore Loan Management Services) Hearing scheduled for

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		3/10/2020 at 10:00 AM at Delta Division. (McDaniel, Lisa) (Entered: 01/29/2020)
01/31/2020	<u>14</u> (2 pgs)	BNC Certificate of Mailing - Hearing(RE: related document(s) <u>13</u> HEARING SCHEDULED (RE: related document(s) <u>12</u> Objection to Confirmation of Plan Filed by Christopher K. Baxter on behalf of Creditor Rushmore Loan Management Services) Hearing scheduled for 3/10/2020 at 10:00 AM at Delta Division.) No. of Notices: 2. Notice Date 01/31/2020. (Admin.) (Entered: 01 /31/2020)
02/06/2020	<u>15</u> (1 pg)	Application for Compensation Filed by Bart Ziegenhorn on behalf of Connie Irene Keathley, Thomas Lee Keathley Sr. (Ziegenhorn, Bart) (Entered: 02/06/2020)
02/07/2020	16	Meeting of Creditors Held and Concluded 2/5/2020. (Farisa, Ashley) (Entered: 02/07/2020)

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02/10/2020	<u>17</u> (1 pg)	Order on Application For Compensation Ch. 13 (emccarty) (Entered: 02/10/2020)
02/12/2020	<u>18</u> (2 pgs)	BNC Certificate of Mailing(RE: related document(s) <u>17</u> Order on Application For Compensation Ch. 13 (emccarty)) No. of Notices: 1. Notice Date 02/12/2020. (Admin.) (Entered: 02/12/2020)
02/13/2020	<u>19</u> (1 pg)	Objection to Confirmation of Plan Filed by Trustee (emccarty) (Entered: 02/13/2020)
02/13/2020	<u>20</u> (1 pg)	Objection to Debtor(s) Claim of Exemptions Filed by Trustee (emccarty) (Entered: 02/13/2020)
02/18/2020	<u>21</u> (2 pgs; 2 docs)	Hearing SCHEDULED (RE: related document(s) <u>19</u> Objection to Confirmation of Plan Filed by Trustee (emccarty), <u>20</u> Objection to Debtor(s) Claim of Exemptions Filed by Trustee (emccarty)) Hearing scheduled for 3/10/2020 at 10:00 AM at Phyllis Jones' Helena

		Courtroom. (McDaniel, Lisa) (entered: 02/18/2020)
02/20/2020	<u>22</u> (2 pgs)	BNC Certificate of Mailing - Hearing(RE: related document(s) <u>21</u> Hearing SCHEDULED(RE: related document(s) <u>19</u> Objection to Confirmation of Plan Filed by Trustee (emccarty), <u>20</u> Objection to Debtor(s) Claim of Exemptions Filed by Trustee (emccarty)) Hearing scheduled for 3/10/2020 at 10:00 AM at Phyllis Jones' Helena Courtroom.) No. of Notices: 2. Notice Date 02/20/2020. (Admin.) (Entered: 02/20/2020)
03/09/2020	<u>23</u> (2 pgs; 2 docs)	Hearing CONTINUED PER EMAIL FROM CARLA WARD – PARTIES REQUESTED & AGREED(RE: related document(s) <u>12</u> Objection to Confirmation of Plan Filed by Christopher K. Baxter on behalf of Creditor Rushmore Loan Management Services) Hearing scheduled for 4/16/2020 at 10:00 AM at Phyllis Jones' Helena

		Courtroom. (McDaniel, Lisa) (Entered : 03/09/2020)
03/09/2020	<u>24</u> (2 pgs; 2 docs)	Hearing CONTINUED PER EMAIL FROM TRUSTEE – PARTIES REQUESTED & AGREED (RE: related document(s) <u>20</u> Objection to Debtor(s) Claim of Exemptions Filed by Trustee (emccarty)) Hearing scheduled for 4/16/2020 at 10:00 AM at Delta Division. (McDaniel, Lisa) (Entered: 03/09/2020)
03/09/2020	<u>25</u>	Hearing Scheduled For 3/10/2020 Not Held. PER EMAIL FROM TRUSTEE, SUSTAINED. TRUSTEE TO PREPARE ORDER (RE: related document(s) <u>19</u> Objection to Confirmation of Plan Filed by Trustee (emccarty)) (McDaniel, Lisa) (Entered: 03/09/2020)
03/10/2020	<u>26</u> (1 pg)	Order to Modify Plan (emccarty) (Entered: 03/10/2020)
03/11/2020	<u>27</u> (10 pgs)	Chapter 13 AMENDED Plan With Notice of Opportunity to Object/Respond, and Request for Valuation of

		Security. Filed by Bart Ziegenhorn on behalf of Joint Debtor Connie Irene Keathley, Debtor Thomas Lee Keathley Sr. (Ziegenhorn, Bart) (Entered: 03/11/2020)
03/11/2020	<u>28</u> (2 pgs)	BNC Certificate of Mailing - Hearing(RE: related document(s) <u>23</u> Hearing CONTINUED PER EMAIL FROM CARLA WARD - PARTIES REQUESTED & AGREED(RE: related document(s) <u>12</u> Objection to Confirmation of Plan Filed by Christopher K. Baxter on behalf of Creditor Rushmore Loan Management Services) Hearing scheduled for 4/16/2020 at 10:00 AM at Phyllis Jones' Helena Courtroom.) No. of Notices: 2. Notice Date 03/11/2020. (Admin.) (Entered: 03/11/2020)
03/11/2020	<u>29</u> (2 pgs)	BNC Certificate of Mailing - Hearing(RE: related document(s) <u>24</u> Hearing CONTINUED PER EMAIL FROM TRUSTEE - PARTIES REQUESTED & AGREED(RE: related

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		document(s) <u>20</u> Objection to Debtor(s) Claim of Exemptions Filed by Trustee (emccarty)) Hearing scheduled for 4/16/2020 at 10:00 AM at Delta Division.) No. of Notices: 2. Notice Date 03/11/2020. (Admin.) (Entered: 03/11/2020)
03/23/2020	<u>30</u> (4 pgs; 4 docs)	Notice of Requirement to Complete Course in Financial Management (admin) (Entered: 03/23/2020)
03/26/2020	<u>31</u> (2 pgs)	BNC Certificate of Mailing(RE: related document(s) <u>30</u> Notice of Requirement to Complete Course in Financial Management (admin)) No. of Notices: 1. Notice Date 03/26/2020. (Admin.) (Entered: 03 /26 / 2020)
04/10/2020	32	NO Hearing Held (RE: Objection to Debtor(s) Claim of Exemptions - related document(s) <u>20</u>) (Hearing NOT Held (4/14/2020): PER EMAIL FROM TRUSTEE - SUSTAINED)(McDaniel, Lisa) (Entered : 04/10/2020)

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04/15/2020	<u>33</u> (4 pgs; 4 docs)	Hearing Continued (RE:Objection to Confirmation of the Plan - related document(s) <u>12</u>) (Continued to 6/16/2020 10:00 AM at Delta Division) (HEARING 4/16/2020 NOT HELD: PER EMAIL FROM CARLA WARD Hearing CONTINUED - PARTIES REQUESTED AND AGREED) (McDaniel, Lisa) (Entered: 04/15/2020)
04/16/2020	<u>34</u> (1 pgs)	Order Sustaining Trustee Objection to Exemptions . (emccarty) (Entered: 04/16/2020)
04/17/2020	<u>35</u> (2 pgs; 2 docs)	Order Withdrawing Objection to Confirmation of Plan Filed by Christopher K. Baxter on behalf of Creditor Rushmore Loan Management Services. (RE: related document(s) <u>12</u>) Entered on 4/17/2020(Johnson, LaTrese) (Entered: 04/17/2020)
04/17/2020	<u>36</u> (2 pgs)	BNC Certificate of Mailing - Hearing(RE: related document(s) <u>33</u> Hearing Continued (RE:Objection

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		to Confirmation of the Plan - related document(s) <u>12</u> (Continued to 6/16/2020 10:00 AM at Delta Division) (HEARING 4/16/2020 NOT HELD: PER EMAIL FROM CARLA WARD Hearing CONTINUED - PARTIES REQUESTED AND AGREED)) No. of Notices: 7. Notice Date 04/17/2020. (Admin.) (Entered: 04/17/2020)
04/17/2020	<u>37</u> (2 pgs)	BNC Certificate of Mailing - Hearing(RE: related document(s) <u>33</u> Hearing Continued (RE:Objection to Confirmation of the Plan - related document(s) <u>12</u>) (Continued to 6/16/2020 10:00 AM at Delta Division) (HEARING 4/16/2020 NOT HELD: PER EMAIL FROM CARLA WARD Hearing CONTINUED - PARTIES REQUESTED AND AGREED)) No. of Notices: 2. Notice Date 04/17/2020. (Admin.) (Entered: 04/17/2020)
04/19/2020	<u>38</u> (2 pgs)	BNC Certificate of Mailing(RE: related

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		document(s) <u>35</u> Order Withdrawing Objection to Confirmation of Plan Filed by Christopher K. Baxter on behalf of Creditor Rushmore Loan Management Services. (RE: related document(s) <u>12</u>) Entered on 4/17/2020(Johnson, LaTrese)) No. of Notices: 2. Notice Date 04/19/2020. (Admin.) (Entered: 04/19/2020)
04/20/2020	<u>39</u> (1 pg)	Order Confirming Chapter 13 Plan (emccarty) (Entered: 04/20/2020)
04/22/2020	<u>40</u> (2 pgs)	BNC Certificate of Mailing(RE: related document(s) <u>39</u> Order Confirming Chapter 13 Plan (emccarty)) No. of Notices: 1. Notice Date 04/22/2020. (Admin.) (Entered: 04/22/2020)
05/14/2020	41	RECEIPT of Chapter 13 Plan(2:19-bk-16848) [plan, 13pln] (31.00) Filing Fee. receipt number 14272394, amount \$ 31.00. (U.S. Treasury) (Entered: 05/14/2020)

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06/02/2020	<u>42</u> (1 pg)	Motion to Dismiss Case for Failure to Make Plan Payments Filed by Trustee (emccarty) (Entered: 06/02/2020)
06/03/2020	43	Court Calendar Update(RE: related document(s) <u>42</u> Motion to Dismiss Case for Failure to Make Plan Payments Filed by Trustee (emccarty)) Hearing scheduled for 6/16/2020 at 10:00 AM at Phyllis Jones' Helena Courtroom. (McDaniel, Lisa) (Entered: 06/03/2020)
06/15/2020	44	NO Hearing Held (RE: Motion to Dismiss Case for Failure to Make Plan Payments - related document(s) <u>42</u>) (Hearing NOT Held (6/16/2020): PER EMAIL FROM TRUSTEE - STRICT COMPLIANCE)(McDaniel, Lisa) (Entered: 06/15/2020)
06/15/2020	<u>doc</u> (10 pgs)	Notice of Mortgage Payment Change (Claim # 4)with Certificate of Service Filed by Christopher K. Baxter on behalf of Rushmore Loan Management Services

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		(Baxter, Christopher) (Entered: 06/15/2020)
06/16/2020	<u>45</u> (1 pg)	Order Withdrawing Trustee Motion to Dismiss Upon Conditions (emccarty) (Entered: 06/16/2020)
07/02/2020	<u>46</u> (2 pgs)	Trustee's Summary Notice of Claims Filed (emccarty) (Entered: 07/02/2020)
02/18/2021	<u>47</u> (1 pg)	Additional Trustee's Notice of Claim (emccarty) (Entered: 02/18/ 2021)
07/22/2021	<u>doc</u> (7 pgs)	Notice of Mortgage Payment Change (Claim # 4)with Certificate of Service Filed by Christopher K. Baxter on behalf of First Guaranty Mortgage Corporation (Baxter, Christopher) (Entered: 07/22/2021)
01/12/2022	<u>48</u> (1 pg)	Motion to Dismiss Case for Failure to Make Plan Payments Filed by Trustee (emccarty) (Entered: 01/12/2022)
02/01/2022	<u>49</u> (1 pg)	Order Withdrawing Trustee Motion to Dismiss Upon Conditions (emccarty) (Entered: 02/01/2022)

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02/26/2022	<u>50</u> (4 pgs; 3 docs)	Transfer/Assignment of Claim Transfer Agreement 3001 (e) 2 Transferor: First Guaranty Mortgage Corporation (Claim No. 4) To Carrington Mortgage Services, LLC Fee Amount \$26 Filed by (Lynch-Horton, Shabrena) (Entered: 02/26/2022)
02/27/2022		RECEIPT of Transfer of Claim(<u>2:19-bk-16848</u>) [claims,trclm] (26.00) Filing Fee. receipt number A15096847, amount \$ 26.00. (U.S. Treasury) (Entered: 02/27/2022)
03/01/2022	<u>51</u> (11 pgs; 2 docs)	Chapter 13 MODIFIED Plan With Notice of Opportunity to Object/Respond. Filed by Bart Ziegenhorn on behalf of Joint Debtor Connie Irene Keathley, Debtor Thomas Lee Keathley Sr. (Attachments: # <u>1</u> Notice of Opportunity to Object)(Ziegenhorn, Bart) (Entered: 03/01/2022)
03/02/2022	<u>52</u> (1 pg)	Order to Pay Trustee (emccarty) (Entered: 03/02/2022)

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03/02/2022	<u>53</u> (3 pgs)	BNC Certificate of Mailing(RE: related document(s) <u>50</u> Transfer/Assignment of Claim Transfer Agreement 3001 (e) 2 Transferor: First Guaranty Mortgage Corporation (Claim No. 4) To Carrington Mortgage Services, LLC Fee Amount \$26 Filed by) No. of Notices: 1. Notice Date 03/02/2022. (Adm in.) (Entered: 03/02/2022)
03/16/2022	<u>54</u> (1 pg)	Objection to Confirmation of Modified Plan Filed by Trustee (emccarty) (Entered: 03/16/2022)
03/17/2022	<u>55</u> (2 pgs; 2 docs)	Telephonic Evidentiary Hearing SCHEDULED (RE: related document(s) <u>54</u> Objection to Confirmation of Modified Plan Filed by Trustee (emccarty)) Hearing scheduled for 5/3/2022 at 10:00 AM at Telephonic Hearing. (McDaniel, Lisa) (Entered: 03/17/2022)
03/19/2022	<u>56</u> (3 pgs)	BNC Certificate of Mailing - Hearing(RE: related document(s) <u>55</u> Telephonic Evidentiary Hearing SCHEDULED (RE: related

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		document(s) <u>54</u> Objection to Confirmation of Modified Plan Filed by Trustee (emccarty)) Hearing scheduled for 5/3/2022 at 10:00 AM at Telephonic Hearing.) No. of Notices: 7. Notice Date 03/19/2022. (Admin.) (Entered: 03/19/2022)
04/26/2022	<u>doc</u> (5 pgs)	Notice of Mortgage Payment Change (Claim # 4)with Certificate of Service Filed by Carrington Mortgage Services, LLC (Miller, Randall) (Entered: 04/26/2022)
05/02/2022	<u>57</u> (2 pgs; 2 docs)	Telephonic Evidentiary Hearing CONTINUED PER EMAIL FROM TRUSTEE - PARTIES REQUESTED & AGREED(RE: related document(s) <u>54</u> Objection to Confirmation of Modified Plan Filed by Trustee (emccarty)) Hearing scheduled for 6/1/2022 at 10:00 AM at Telephonic Hearing. (McDaniel, Lisa) (Entered: 05/02/2022)

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05/04/2022	<u>58</u> (3 pgs)	BNC Certificate of Mailing - Hearing(RE: related document(s) <u>57</u> Telephonic Evidentiary Hearing CONTINUED PER EMAIL FROM TRUSTEE - PARTIES REQUESTED & AGREED(RE: related document(s) <u>54</u> Objection to Confirmation of Modified Plan Filed by Trustee (emccarty)) Hearing scheduled for 6/1/2022 at 10:00 AM at Telephonic Hearing.) No. of Notices: 7. Notice Date 05/04/2022. (Admin.) (Entered: 05/04/2022)
05/27/2022	59	Hearing Scheduled For 6/1/2022 Not Held. PER EMAIL FROM TRUSTEE, SUSTAINED. TRUSTEE TO PREPARE ORDER (RE: related document(s) <u>54</u> Objection to Confirmation of Modified Plan Filed by Trustee (emccarty)) (McDaniel, Lisa) (Entered: 05/27/2022)
06/01/2022	<u>60</u> (1 pg)	Order to Modify Plan (emccarty) (Entered: 06/01/2022)
06/27/2022	<u>61</u> (9 pgs)	Chapter 13 AMENDED Plan With Notice of

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		Opportunity to Object/ Respond. Filed by Bart Ziegenhorn on behalf of Joint Debtor Connie Irene Keathley, Debtor Thomas Lee Keathley Sr. (Ziegenhorn, Bart) (Entered: 06/27/2022)
06/27/2022	<u>62</u> (9 pgs)	Chapter 13 MODIFIED Plan With Notice of Opportunity to Object/ Respond. Filed by Bart Ziegenhorn on behalf of Joint Debtor Connie Irene Keathley, Debtor Thomas Lee Keathley Sr. (Ziegenhorn, Bart) (Entered: 06/27/2022)
06/28/2022	<u>63</u> (1 pg)	Order to Pay Trustee (emccarty) (Entered: 06/28/2022)
07/20/2022	<u>64</u> (2 pgs; 2 docs)	Order Confirming Modified Chapter 13 Plan (emccarty) (Entered: 07/20/2022)
07/22/2022	<u>65</u> (3 pgs)	BNC Certificate of Mailing(RE: related document(s) <u>64</u> Order Confirming Modified Chapter 13 Plan (emccarty)) No. of Notices: 5. Notice Date 07/22/2022.

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		(Admin.) (Entered: 07/22/2022)
04/04/2023	<u>66</u> (7 pgs)	Amended Schedules/ Statements Filed: Sch A/B, [Fee Due No] Filed by Bart Ziegenhorn on behalf of Joint Debtor Connie Irene Keathley, Debtor Thomas Lee Keathley Sr. (Ziegenhorn, Bart) (Entered: 04/04/2023)
04/05/2023	<u>67</u> (2 pgs; 2 docs)	Telephonic Evidentiary Hearing SCHEDULED (RE: related document(s) <u>66</u> Amended Schedules/ Statements Filed: Sch A/B, [Fee Due No] Filed by Bart Ziegenhorn on behalf of Joint Debtor Connie Irene Keathley, Debtor Thomas Lee Keathley Sr.) Hearing scheduled for 5/2/2023 at 10:00 AM at Telephonic Hearing. (McDaniel, Lisa) (Entered: 04/05/2023)
04/05/2023	<u>68</u> (2 pgs)	Certificate of Service (RE: related document(s) <u>66</u> Amended Schedules, Statements, Petition Page or Creditors filed by Debtor Thomas Lee Keathley, Joint Debtor Connie Irene Keathley) filed by Bart Ziegenhorn Joint Debtor

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		Connie Irene Keathley, Debtor Thomas Lee Keathley Sr.. (Ziegenhorn, Bart) (Entered: 04/05/2023)
04/05/2023	<u>69</u> (7 pgs; 2 docs)	Application to Employ Attorney for Debtor Filed by Bart Ziegenhorn on behalf of Connie Irene Keathley, Thomas Lee Keathley Sr. (Attachments: # <u>1</u> Exhibit) (Ziegenhorn, Bart) (Entered: 04/05/2023)
04/05/2023	<u>70</u>	Hearing Scheduled For 5/2/2023 Not Held. CERTIFICATE OF SERVICE FILED (RE: related document(s) <u>66</u> Amended Schedules/ Statements Filed: Sch A/B, [Fee Due No] Filed by Bart Ziegenhorn on behalf of Joint Debtor Connie Irene Keathley, Debtor Thomas Lee Keathley Sr.) (McDaniel, Lisa) (Entered: 04/05/2023)
04/06/2023	<u>71</u> (2 pgs; 2 docs)	Telephonic Evidentiary Hearing SCHEDULED (RE: related document(s) <u>69</u> Application to Employ Attorney for Debtor Filed by Bart Ziegenhorn on behalf of Connie

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		Irene Keathley, Thomas Lee Keathley Sr. (Attachments: # 1 Exhibit)) Hearing scheduled for 5/2/2023 at 10:00 AM at Telephonic Hearing. (McDaniel, Lisa) (Entered: 04/06/2023)
04/07/2023	<u>72</u> (3 pgs)	BNC Certificate of Mailing - Hearing(RE: related document(s) <u>67</u> Telephonic Evidentiary Hearing SCHEDULED (RE: related document(s) <u>66</u> Amended Schedules/ Statements Filed: Sch A/B, [Fee Due No] Filed by Bart Ziegenhorn on behalf of Joint Debtor Connie Irene Keathley, Debtor Thomas Lee Keathley Sr.) Hearing scheduled for 5/2/2023 at 10:00 AM at Telephonic Hearing.) No. of Notices: 5. Notice Date 04/07/2023. (Admin.) (Entered: 04/07/2023)
04/08/2023	<u>73</u> (3 pgs)	BNC Certificate of Mailing - Hearing(RE: related document(s) <u>71</u> Telephonic Evidentiary Hearing SCHEDULED(RE: related document(s) <u>69</u>

		Application to Employ Attorney for Debtor Filed by Bart Ziegenhorn on behalf of Connie Irene Keathley, Thomas Lee Keathley Sr. (Attachments: # 1 Exhibit)) Hearing scheduled for 5/2/2023 at 10:00 AM at Telephonic Hearing.) No. of Notices: 5. Notice Date 04/08/2023. (Admin.) (Entered: 04/08/2023)
04/14/2023	<u>74</u> (11 pgs; 3 docs)	Motion for Approval <i>Settlement of Worker's Comp. Claim</i> Filed by Bart Ziegenhorn on behalf of Connie Irene Keathley, Thomas Lee Keathley Sr. (Attachments: # <u>1</u> Exhibit Settlement Agreement # <u>2</u> Notice of Opportunity to Object) (Ziegenhorn, Bart) (Entered: 04/14/2023)
04/19/2023	<u>75</u> (2 pgs; 2 docs)	Telephonic Evidentiary Hearing SCHEDULED (RE: related document(s) <u>74</u> Motion for Approval <i>Settlement of Worker's Comp. Claim</i> Filed by Bart Ziegenhorn on behalf of Connie Irene Keathley, Thomas Lee Keathley Sr. (Attachments: # 1 Exhibit

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		Settlement Agreement # 2 Notice of Opportunity to Object)) Hearing scheduled for 5/2/2023 at 10:00 AM at Telephonic Hearing. (McDaniel, Lisa) (Entered: 04/19/2023)
04/21/2023	<u>doc</u> (6 pgs)	Notice of Mortgage Payment Change (Claim # 4)with Certificate of Service Filed by Carrington Mortgage Services, LLC (Miller, Randall) (Entered: 04/21/2023)
04/21/2023	<u>76</u> (3 pgs)	BNC Certificate of Mailing - Hearing(RE: related document(s) <u>75</u> Telephonic Evidentiary Hearing SCHEDULED(RE: related document(s) <u>74</u> Motion for Approval <i>Settlement of Worker's Comp Claim</i> Filed by Bart Ziegenhorn on behalf of Connie Irene Keathley, Thomas Lee Keathley Sr. (Attachments: # 1 Exhibit Settlement Agreement # 2 Notice of Opportunity to Object)) Hearing scheduled for 5/2/2023 at 10:00 AM at Telephonic Hearing.) No. of Notices: 5. Notice Date

		04/21/2023. (Admin.) (Entered: 04/21/2023)
04/28/2023	<u>77</u> (2 pgs; 2 docs)	Evidentiary Hearing CONTINUED PER TELEPHONE CALL FROM BART ZIEGENHORN - PARTIES REQUESTED & AGREED (RE: related document(s) <u>69</u> Application to Employ Attorney for Debtor Filed by Bart Ziegenhorn on behalf of Connie Irene Keathley, Thomas Lee Keathley Sr. (Attachments: # 1 Exhibit), <u>74</u> Motion for Approval <i>Settlement of Worker's Comp. Claim</i> Filed by Bart Ziegenhorn on behalf of Connie Irene Keathley, Thomas Lee Keathley Sr. (Attachments: # 1 Exhibit Settlement Agreement # 2 Notice of Opportunity to Object)) Hearing scheduled for 5/25/2023 at 10:00 AM at Phyllis Jones' Helena Courtroom. (McDaniel, Lisa) (Entered: 04/28/2023)
04/28/2023	<u>78</u> (12 pgs; 3 docs)	Amended Motion for Approval <i>Worker's Compensation Settlement</i> Filed by Bart Ziegenhorn

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		on behalf of Connie Irene Keathley, Thomas Lee Keathley Sr. (Attachments: # <u>1</u> Exhibit # <u>2</u> , Notice of Opportunity to Object) (Ziegenhorn, Bart) (Entered: 04/28/2023)
04/28/2023	<u>79</u>	Hearing Scheduled For 5/25/2023 Not Held. AMENDED FILED (RE: related document(s) <u>74</u> Motion for Approval <i>Settlement of Worker's Comp. Claim</i> Filed by Bart Ziegenhorn on behalf of Connie Irene Keathley, Thomas Lee Keathley Sr. (Attachments: # <u>1</u> Exhibit Settlement Agreement # <u>2</u> Notice of Opportunity to Object)) (McDaniel, Lisa) (Entered: 04/28/2023)
04/30/2023	<u>80</u> (3 pgs)	BNC Certificate of Mailing - Hearing(RE: related document(s) <u>77</u> Evidentiary Hearing CONTINUED PER TELEPHONE CALL FROM BART ZIEGENHORN - PARTIES REQUESTED & AGREED (RE: related document(s) <u>69</u> Application to Employ Attorney for Debtor Filed

		by Bart Ziegenhorn on behalf of Connie Irene Keathley, Thomas Lee Keathley Sr. (Attachments: # 1 Exhibit), <u>74</u> Motion for Approval <i>Settlement of Worker's Comp. Claim</i> Filed by Bart Ziegenhorn on behalf of Connie Irene Keathley, Thomas Lee Keathley Sr. (Attachments: # 1 Exhibit Settlement Agreement # 2 Notice of Opportunity to Object)) Hearing scheduled for 5/25/2023 at 10:00 AM at Phyllis Jones' Helena Courtroom.) No. of Notices: 5. Notice Date 04/30/2023. (Admin.) (Entered: 04/30/2023)
05/04/2023	<u>81</u> (1 pg)	Affidavit Re: <i>Attorney</i> (RE: related document(s) <u>69</u> Application to Employ filed by Debtor Thomas Lee Keathley, Joint Debtor Connie Irene Keathley) filed by Bart Ziegenhorn Joint Debtor Connie Irene Keathley, Debtor Thomas Lee Keathley Sr.. (Ziegenhorn, Bart) (Entered: 05/04/2023)

05/04/2023	<u>82</u> (1 pg)	Affidavit Re: <i>Attorney Thomas Greer</i> (RE: related document(s) <u>69</u> Application to Employ filed by Debtor Thomas Lee Keathley, Joint Debtor Connie Irene Keathley) filed by Bart Ziegenhorn Joint Debtor Connie Irene Keathley, Debtor Thomas Lee Keathley Sr.. (Ziegenhorn, Bart) (Entered: 05/04/2023)
05/04/2023	<u>83</u> (3 pgs; 2 docs)	Order To Employ Counsel. (Related Doc # <u>69</u>) Entered on Docket 5/4/2023 (Wilkins, Tanya) (Entered: 05/04/2023)
05/05/2023	<u>84</u> (3 pgs; 2 docs)	Application to Employ Attorney for Debtor Filed by Bart Ziegenhorn on behalf of Connie Irene Keathley, Thomas Lee Keathley Sr. (Attachments: # <u>1</u> Exhibit Affidavit) (Ziegenhorn, Bart) (Entered: 05/05/2023)
05/05/2023	<u>85</u> (2 pgs; 2 docs)	Order Employing Counsel NUNC PRO TUNC. (Related Doc # <u>84</u> .) Entered on Docket 5/5/2023 (Wilkins, Tanya) (Entered: 05/05/2023)

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05/06/2023	<u>86</u> (4 pgs)	BNC Certificate of Mailing(RE: related document(s) <u>83</u> Order To Employ Counsel. (Related Doc <u>69</u>) Entered on Docket 5/4/2023 (Wilkins, Tanya)) No. of Notices: 4. Notice Date 05/06/2023. (Admin.) (Entered: 05/06/2023)
05/07/2023	<u>87</u> (3 pgs)	BNC Certificate of Mailing(RE: related document(s) <u>85</u> Order Employing Counsel NUNC PRO TUNC. (Related Doc <u>84</u>) Entered on Docket 5/5/2023 (Wilkins, Tanya)) No. of Notices: 2. Notice Date 05/07/2023. (Admin.) (Entered: 05/07/2023)
05/24/2023	<u>88</u> (3 pgs; 2 docs)	Order approving Worker's Compensation Settlement. (Related Doc # <u>78</u>) Entered on Docket 5/24/2023 (Wilkins, Tanya) (Entered: 05/24/2023)
05/26/2023	<u>89</u> (4 pgs)	BNC Certificate of Mailing(RE: related document(s) <u>88</u> Order approving Worker's Compensation Settlement. (Related Doc <u>78</u>) Entered on Docket

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		5/24/2023 (Wilkins, Tanya)) No. of Notices: 9. Notice Date 05/26/2023. (Admin.) (Entered: 05/26/2023)
06/05/2023	<u>doc</u> (6 pgs)	Notice of Mortgage Payment Change (Claim # 4)with Certificate of Service Filed by Carrington Mortgage Services, LLC (Miller, Randall) (Entered: 06/05/2023)

* * *

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[ROA 2570-72]

A

The Alders Law Firm

1. EMPLOYMENT: Now on this 08/24/2021, I, Thomas Keathley, ("Client") hereby retain Attorney Austin Alders ("Attorney") of the Alders Law Firm, 119 South Main Street, Suite 500 Memphis, TN 38103 as my attorney to represent me ("Client") against any individual, company or entity in all matters arising out of a personal injury incident occurring on 8/23/21.

2. ATTORNEY, I understand that my primary attorney shall be Attorney Austin Alders. I further understand that from time to time paralegals or assistants in the firm may be used to assist in my case. I acknowledge that Attorney has made no guarantee as to the outcome or amounts recoverable in connection with Client's claim.

3. ATTORNEY'S FEE I at this moment agree and contract that Attorney Austin Alders will receive as his fee thirty-three and one third percent (33.33%) of the gross amount received by way of settlement. In the event there is no recovery, there shall be no charge for attorney's fees. I understand that the amount Attorney Austin Alders recovers is separate from the expenses of the case which will be reimbursed through any recovery. In the event the expenses are greater than the recovery, client will not owe or be liable to the Alders Law Firm for the remainder of the expenses.

I agree that the above terms represent a reasonable fee, for compensation for the professional services of

Attorney Austin Alders, which shall be determined depending upon such factors as the time required; the difficulty of the matter; the fees customarily charged in the community for similar work; any special or additional time demands, and the experience, reputation, skill and ability of both Attorney Austin Alders and the lawyer(s) representing the other party.

I understand that the fee which will be charged will be based on one-third of any recovery amount collected. I realize that the amount of the fee relates to the time spent on my case; which includes but is not limited to, time spent for conferences, telephone calls, research, drafting of documents, review of documents, negotiations, court time and travel to and from locations from Attorney Austin Alders' office.

4. EXPENSES AND COSTS: Attorney Austin Alders is authorized to pay on my behalf for all expenses pertaining to this matter including, but not limited to, copies of medical records, police reports, depositions, investigative fees, photocopying, postage, filing fees of the court, expert witness fees, court reporter and videographer fees, 911 records, court costs, subpoena costs, fees and expenses of any necessary experts, which Attorney Austin Alders deems necessary to assist in the preparation and trial of my case. I understand that any outstanding expenses incurred by Attorney Austin Alders on my behalf will be paid out of any recovery, in addition to and on top of the attorney fee of thirty-three and one third percent (33.33%).

5. LIMITED POWER OF ATTORNEY: I, Thomas Keathley ("Client") hereby give power to Attorney Austin Alders to execute and endorse all documents and papers that the client would execute relating to

the subject matter of the claim. This includes but is not limited to any Health Insurance Portability and Accountability Act, (HIPPA) or non-HIPPA documentation pertaining to the acquisition of any medical records and documents or bills needed to move the case towards resolution. Which can also include any documentation needed to put any Employee Retirement Income Security Act (ERISA) or non-ERISA state, federal or private entity on notice of subrogation interest. Furthermore, Thomas Keathley expressly authorizes Attorney Austin Alders to endorse and deposit into the Firm's Trust Account any checks in the Client's name and to deduct fees, cost, and expenses, and to pay all proper hospital and medical bills as well as any Medicare, Medicaid, ERISA, Workers Compensation, or Insurance liens from the Client's share of the recovery.

6. MEDICAL LIENS I authorize Attorney Austin Alders to pay any outstanding medical bills, charges, claims, and liens, including claims of health care plans and insurers, incurred as a result of the above incident, out of any recovery obtained on my behalf.

7. WITHDRAWAL AND CANCELLATION: I agree that Attorney Austin Alders shall have the right to withdraw from my case if I have misrepresented or failed to disclose material facts in this case. Or if I fail to follow Attorney Austin Alders advice/instructions; or if, in Attorney Austin Alders opinion, either the conduct of myself or others or any other circumstance renders it unreasonably difficult for him to carry out his services effectively.

I (Client) retain the right to cancel further representation pursuant to this agreement at any time, subject to Court approval if Attorney Austin

Alders has entered an appearance in a pending case. In any of these events; I agree that I will immediately execute such documents as are reasonably necessary to permit Attorney Austin Alders to withdraw and acknowledge that I will immediately pay any fees and expenses incurred.

8. TAX ADVICE SPECIFICALLY EXCLUDED: I understand that Attorney Austin Alders will not provide any tax advice. Attorney Alders has advised me ("Client") that any settlement, award or judgment obtained as a result of the representation may be partly or wholly taxable. Attorney Alders has informed me ("Client") that tax advice is specifically excluded from the scope of the services my attorney (Austin Alders) will provide under this agreement. Attorney Alders has informed me ("Client") that he/she is not an expert in tax law and has recommended that client obtain advice from a tax practitioner concerning the tax consequences of any recovery.

9. NO REPRESENTATIVES OR GUARANTEES: I ACKNOWLEDGE THAT ATTORNEY AUSTIN ALDERS HAS MADE NO REPRESENTATIONS OR GUARANTEES CONCERNING THE OUTCOME OF THIS CASE.

10. FILE RETENTION AGREEMENT: Client(s) hereby expressly agree(s) and consent(s) that Attorney Austin Alders need not store client's file for more than 5 years after completion or termination of the representation, regardless of any Rule of Professional Conduct to the contrary, and expressly consents that Attorney Austin Alders may destroy client's file 5 years after completion or termination of

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the representation of the client(s) without further notice to the client(s).

THE PARTIES HAVE READ AND UNDERSTOOD THE FOREGOING TERMS AND AGREE TO THEM, AS OF THE DATE ATTORNEY FIRST PROVIDED SERVICES. IF MORE THAN ONE CLIENT SIGNS BELOW, EACH AGREES TO BE LIABLE JOINTLY AND SEVERALLY FOR ALL OBLIGATIONS UNDER THIS AGREEMENT. THE CLIENT SHALL RECEIVE A FULLY EXECUTED DUPLICATE OF THIS AGREEMENT.

<u>8/24/21</u>	<u>s/ [illegible]</u>
DATE	On behalf of The Alders Law Firm

I/We have read and understand the foregoing terms and conditions and agree to each of them. If more than one party signs below, we agree to be liable jointly and severally for all obligations under this agreement. By signing this agreement, I/we acknowledge receipt of a fully executed duplicate of this agreement.

<u>8/24/21</u>	<u>s/ Thomas Keathley</u>
DATE	CLIENT

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This document was signed by:

Thomas Keathley

Vinesign

s/ Thomas Keathley

Date 8/24/2021 12:59 PM UTC

Phone 9014932581

V

IP Address

Vinesign.com

Confirmation

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[ROA 2573-77]

[seal omitted]

TENNESSEE BUREAU OF WORKERS'
COMPENSATION
IN THE COURT OF WORKERS'
COMPENSATION CLAIMS
AT MEMPHIS

THOMAS KEATHLEY,	*	
Employee,	*	
VS.	*	DOCKET NO.:
	*	2021-08-1082
J.B. HUNT TRANSPORT,	*	
INC.	*	STATE FILE NO.:
Employer,	*	67300-2021
And	*	
INDEMNITY	*	JUDGE
INSURANCE COMPANY	*	SHATERRA
OF NORTH	*	REED MARION
AMERICA / ESIS	*	
Insurance Carrier/TPA	*	

**WORKERS' COMPENSATION SETTLEMENT
AGREEMENT**

EMPLOYEE: **THOMAS KEATHLEY**, whose date of birth is and is a resident of Marion, Arkansas. Employee has completed formal education through Twelfth (12TH) Grade.

EMPLOYER: **J.B. HUNT TRANSPORT, INC.**, a corporation having a principal place of business in Lowell, Arkansas.

**INSURANCE CARRIER: INDEMNITY
INSURANCE COMPANY OF NORTH
AMERICA / ESIS**, with an office in Scranton, Pennsylvania, under contract with Employer to provide workers' compensation insurance for the benefit of its employees and/or to administer workers' compensation claims for the benefit of its employees.

This Settlement Agreement is entered into on DECEMBER 22, 2022. After reviewing this Agreement and hearing the parties' testimony, the Judge will determine whether this proposed settlement provides Employee substantially the benefits under the Tennessee Workers' Compensation Law, Tenn. Code Ann. § 50-6-101 et seq. Employee received, reviewed, and signed the "Explanation of Workers' Compensation Benefits" and had the opportunity to ask questions regarding the agreement.

The Parties entered into this voluntary settlement under the terms below with full knowledge of their rights and responsibilities, including the right to be represented by an attorney. Employee acknowledged by signature that Employee is not obligated to enter this Agreement and has the right to a Compensation Hearing but waives that right.

On or about August 23, 2021, Employee was a sixty-three (63) year old resident of Marion, Arkansas, with a Twelfth (12TH) Grade education, and while working for Employer and engaged in activity arising out of and in the course and scope of employment, Employee was involved in a motor vehicle accident where his tractor-trailer was rear-ended at a red light by another tractor-trailer, whereupon Employee sustained alleged injuries to

the Employee's neck/cervical spine, back/lumbar spine, right thumb, right and left arms, and right and left legs.

Employee received medical care for the right thumb and right arm injuries by the authorized treating physician, Dr. Robert Cole, and was diagnosed with a ulnar collateral ligament injury to the right thumb and bilateral carpal tunnel syndrome. strain/sprain of the right ankle, strain/sprain of the right knee, and an osteochondral defect of the trochlea of the right knee. Employee received unauthorized medical care for the Employee's alleged neck/cervical spine and back/lumbar spine injuries. Employee did not reach the maximum level of medical improvement that the nature of the Employee's neck/cervical spine and back/lumbar spine injuries permits because there is a dispute whether said injuries are compensable and/or work-related. Employee reached the maximum level of medical improvement that the nature of the Employee's compensable injury and/or injuries permits on May 16, 2022, and retained a permanent medical impairment rating of 3% to the body as a whole based on the AMERICAN MEDICAL ASSOCIATION GUIDES TO THE EVALUATION OF PERMANENT IMPAIRMENT (6TH Edition).

Employee's average weekly wage is \$1,073.41, resulting in a weekly compensation rate of \$715.61 for the Employee's date of injury. Employee received any and all temporary partial disability benefits and/or temporary total disability benefits to which Employee is entitled prior to this settlement. Employee expressly acknowledges and agrees that no additional temporary benefits are due and owing.

The Parties dispute whether this claim is compensable and/or the amount of compensation due. The specific issues in dispute are whether Employee's neck/cervical spine and back/lumbar spine injuries are compensable or whether Employee's compensable and/or non-compensable injuries resulted in any type of permanent anatomical impairment and/or vocational impairment. Therefore, the Parties are settling this case on a disputed basis, under Tenn. Code Ann. § 50-6-240(e), for a lump-sum payment of \$22,500.00. The Parties agree that this settlement is in Employee's best interest.

Employee incurred authorized medical expenses, which Employer paid or will pay. As part of this doubtful and disputed settlement, Employee agrees to close the right to future treatment. Employee was informed that closing future medical benefits *might* affect available benefits, coverage, or liability by Medicare, TennCare, Medicaid or other governmental programs, and private health insurance, which might otherwise provide disability or medical benefits. Employee understands that, by agreeing to this compromised settlement with closed future medical benefits, Employee will no longer be entitled to treatment after today from the accident/injury on August 23, 2021, while employed by J.B. Hunt Transport, Inc.

It is in Employee's best interests to close future medical benefits based upon the dispute among the Parties as to whether Employee's injury is compensable or whether Employee's injury resulted in any type of permanent anatomical impairment and/or vocational impairment. It is further in Employee's best interests to close future medical benefits in that Employee believes that Employee's

injury and the results of same will not require any type of major and/or substantive medical treatment or care in the future, and that the amount of the lump sum payment for the settlement of Employee's future medical benefits is sufficient to cover any anticipated future treatment needs. Employee further acknowledges and agrees that it is Employee's personal opinion that Employee's injury and the results of same will not require any type of major and/or substantive medical treatment or care in the future and that any such medical treatment or care that is anticipated is adequately provided for and/or compensation is being received by Employee via the settlement amount that has been agreed upon by Employee for the settlement of this claim and the closure of future medical benefits.

Employee further acknowledges that while the Workers' Compensation Judge and Counsel explained that closing future medical benefits *might* affect liability of Medicare and TennCare in the future, which includes but is not limited to:

- 1) Maintenance of a Medicare Set-Aside trust account to the satisfaction of the Centers for Medicare & Medicaid Services (CMS).
- 2) Reimbursement of CMS for Medicare expenses paid on behalf of Employee.
- 3) Suspension or termination of Employee's Medicare benefits.

Employee has not relied on any statement of the law or other explanation from the Workers' Compensation Judge or Counsel in deciding to close future medical benefits.

Pursuant to Tenn. Code Ann. § 50-6-229, the Parties agree that commutation of benefits to a lump

sum payment of \$22,500.00 is in the best interests of Employee in consideration of the ability of Employee to wisely manage and control the commuted award. Employee acknowledges that if Employee were to try this case in the Court of Workers' Compensation Claims the award may be more or less than the agreed upon settlement amount and may not be ordered in a lump sum payment.

The Parties agree that payment of any sum immediately due shall be paid within thirty (30) days of approval by the Tennessee Court of Workers' Compensation Claims. Employee understands that if Employee is represented by an attorney that said attorney is entitled to a fee of up to twenty percent (20%) plus any incurred expenses, and that amount will be deducted from the settlement proceeds.

The Employee affirmatively states that Employee is not subject to or responsible for any current or overdue support obligations contemplated by Tenn. Code Ann. § 50-6-223, in the State of Tennessee.

The parties agree as follows: (a) that the Employee is 64 years of age; (b) that according to life expectancy as determined from mortality tables maintained by the United States Centers for Disease Control and Prevention, Employee's life expectancy is 19.41 years, or 232.92 months; and (c) that the above described settlement amount minus attorney's fees and expenses of \$4,500.00, constitutes a total lump sum of \$18,000.00 or an amortized monthly benefit of \$77.28 per month, representing the maximum monthly set-off for Social Security or other disability benefits, as allowed by Tenn. Code Ann. § 50-6-207; further, no representations or warranties have been made to Employee concerning the rights of the Social Security Administration to potential or actual set-off of any

Social Security disability benefits, or the effect thereof, upon benefits received or receivable by Employee under this Settlement Agreement pursuant to the Tennessee Workers' Compensation Act; and Employee, by signature affixed hereto, acknowledges that no such representations have been made.

The parties agree that any costs associated with the filing of this settlement agreement with the Tennessee Court of Workers' Compensation Claims shall be borne by the Employer.

This Agreement represents the entire agreement and complete understanding of the Parties with no representations or promises other than those contained herein. All prior negotiations, representations, and agreements are merged into this contract. The validity, interpretation, and performance of this Agreement shall be controlled by and construed under the laws of the State of Tennessee.

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IN WITNESS WHEREOF, the Parties hereto have
executed their signatures effective from and of the
date herein above written.

s/ Thomas Keathley
EMPLOYEE

s/ [illegible]
EMPLOYEE'S ATTORNEY

J.B. HUNT TRANSPORT, INC.
EMPLOYER

BY: s/ Kyle I. Cannon
KYLE I. CANNON – #22713

AS: ATTORNEY

s/ Kyle I. Cannon
KYLE I. CANNON – #22713
EMPLOYER'S ATTORNEY
26 N. 2ND Street
Memphis, TN 38103
P: 901-527-2157
E: kcannon@gwtclaw.com

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[ROA 2578-79]

DEC 22 2022

TN COURT OF
WORKERS
COMPENSATION CLAIMS

[seal omitted]

TENNESSEE BUREAU OF WORKERS'
COMPENSATION
IN THE COURT OF WORKERS'
COMPENSATION CLAIMS
AT MEMPHIS

THOMAS KEATHLEY,	*	
Employee,	*	
VS.	*	DOCKET NO.:
	*	2021-08-1082
J.B. HUNT TRANSPORT,	*	
INC.	*	STATE FILE NO.:
Employer,	*	67300-2021
And	*	
INDEMNITY	*	JUDGE
INSURANCE COMPANY	*	SHATERRA
OF NORTH	*	REED MARION
AMERICA / ESIS	*	
Insurance Carrier/TPA	*	

**ORDER APPROVING WORKERS'
COMPENSATION SETTLEMENT
AGREEMENT**

THIS CASE came before the Court of Workers' Compensation Claims for approval of the attached Settlement Agreement. The Court considered the Agreement, the Parties' statements, and Counsels' representations.

After determining that the Employee understands Employee's rights provided by the Workers' Compensation Law and the potential benefits to which the Employee may be entitled, the Court finds that settlement of this disputed claim, under Tenn. Code Ann. § 50-6-240(e), is in Employee's best interests.

Employee's attorney is entitled to a fee of up to 20% of the recovery or award plus incurred expenses. Employee's attorney is taking a fee of 20% or \$4,500.00. The undersigned Workers' Compensation Specialist has reviewed the fees of Counsel for the Employer and deems that same are reasonable pursuant to Tenn. Code Ann. § 50-6-226.

THE SETTLEMENT AGREEMENT IS HEREBY APPROVED. The attached written Agreement and all its terms are incorporated in their entirety into this Order.

IT IS SO ORDERED.

Entered this the 22nd day of DECEMBER, 2022.

s/ Shatterra Reed Marion
WORKERS' COMPENSATION
JUDGE

[seal omitted]

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EMPLOYEE

s/ [illegible]
EMPLOYEE'S ATTORNEY

s/ Kyle I. Cannon
ATTORNEY FOR
EMPLOYER/CARRIER

JA-305

[ROA 2580-81]

IN THE UNITED STATES BANKRUPTCY COURT
EASTERN DISTRICT OF ARKANSAS

IN RE:	THOMAS LEE	CASE NO.
	KEATHLEY, SR.	2:19-bk-16848
	CONNIE IRENE	
	KEATHLEY	
	DEBTOR(s)	

MOTION TO APPROVE WORKER'S
COMPENSATION SETTLEMENT

Comes now the Debtors, Thomas Lee Keathley, Sr., and Connie Irene Keathley, by and through their attorney, Bart Ziegenhorn and for their Motion to Approve Worker's Compensation Settlement, states:

1. The Debtor, Thomas Lee Keathley, Sr., was injured in an accident and suffered injuries while on the job.
2. Debtor had a claim for disability pursuant to the Tennessee worker's compensation statute.
3. The Debtor and employer entered into an agreement to settle the claim for disability in the net amount of \$18,000.00. A copy of the Settlement Agreement is attached hereto as Exhibit "A."
4. From the settlement, Debtor had to spend the amount of \$8,000.00 for dental expenses, and paid two additional house notes totaling \$2,468.50. Additionally, Debtor paid additional bills that he fell behind due to his reduced compensation. Debtor has approximately \$4,000.00 from the proceeds
5. Debtor's plan provides for 100% payment to all creditors. Debtor is in compliance with the plan.

6. Debtor would move this Court to approve this settlement and expenditures and direct distribution of the remaining proceeds.

WHEREFORE, the Debtors pray this Court enter an Order approving the settlement and expenditures, that the court direct distribution of the remaining proceeds; and for all other relief to which they may show themselves entitled.

Respectfully submitted,
THOMAS LEE KEATHLEY, SR. and
CONNIE IRENE KEATHLEY, Debtors

By: /s/ Bart Ziegenhorn
BART ZIEGENHORN #16350
Attorney at Law
Post Office Box 830
West Memphis, AR 72301
(870) 732-9100 Telephone
(870) 732-9105 Facsimile

CERTIFICATE OF SERVICE

I, Bart Ziegenhorn, hereby certify that a true and correct copy of the foregoing Motion to Employ Attorney was forwarded to the following via U. S. Postal Service, postage prepaid:

Mark T. McCarty
Chapter 13 Trustee
P. O. Box 5006
North Little Rock, AR 72118

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And all other creditors set out in matrix this 14th day of April 2023.

By: /s/ Bart Ziegenhorn
BART E. ZIEGENHORN #16350

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[ROA 2582-84]

IN THE UNITED STATES BANKRUPTCY COURT
EASTERN DISTRICT OF ARKANSAS

IN RE:	THOMAS LEE	CASE NO.
	KEATHLEY, SR.	2:19-bk-16848
	CONNIE IRENE	
	KEATHLEY	
	DEBTOR(s)	

AMENDED MOTION TO APPROVE WORKER'S
COMPENSATION SETTLEMENT

Comes now the Debtors, Thomas Lee Keathley, Sr., and Connie Irene Keathley, by and through their attorney, Bart Ziegenhorn and for their Amended Motion to Approve Worker's Compensation Settlement, states:

1. The Debtor, Thomas Lee Keathley, Sr., was injured in an accident and suffered injuries while on the job.
2. Debtor had a claim for disability pursuant to the Tennessee worker's compensation statute.
3. The Debtor and employer entered into an agreement to settle the claim for disability in the net amount of \$18,000.00. A copy of the Settlement Agreement is attached hereto as Exhibit "A."
4. From the settlement, Debtor had to spend the amount of \$8,000.00 for dental expenses, and paid two additional house notes totaling \$2,468.50. Additionally, Debtor paid additional bills that he fell behind due to his reduced compensation. Debtor has approximately \$4,000.00 from the proceeds

5. Debtor's plan provides for 100% payment to all creditors. Debtor is in compliance with the plan.

6. Debtor would move this Court to approve this settlement and expenditures and direct distribution of the remaining proceeds.

WHEREFORE, the Debtors pray this Court enter an Order approving the settlement and expenditures, that the court direct distribution of the remaining proceeds; and for all other relief to which they may show themselves entitled.

Respectfully submitted,
THOMAS LEE KEATHLEY, SR. and
CONNIE IRENE KEATHLEY, Debtors

By: /s/ Bart Ziegenhorn
BART ZIEGENHORN #93140
Attorney at Law
Post Office Box 830
West Memphis, AR 72301
(870) 732-9100 Telephone
(870) 732-9105 Facsimile

CERTIFICATE OF SERVICE

The undersigned hereby certifies that a true and correct copy of the Amended Motion to Approve Worker's Compensation Settlement filed on Wednesday, April 17, 2023 by CM/ECF to, Mark T. McCarty, Chapter 13 Trustee; and served by U.S. Mail, postage prepaid to the following on 4/28/2023:

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Department of Finance and Administration	Internal Revenue Service
Legal Division	P.O. Box 7346
P.O. Box 1272	Philadelphia, PA 19101-
Little Rock, AR 72203	7346
Department of Workforce Services	U.S Attorney, Eastern District
Legal Division	P.O. Box 1229
P.O. Box 2981	Little Rock, AR 72202
Little Rock, AR 72203	

And to all creditors whose names and addresses are set forth on the matrices filed in the case.

Carrington Mortgage & Services	Southeastern Physician Services, PC
Via E-Flex	PO Box 1123
	Minneapolis, MN
	55440-1123
Crittenden EMS	1st Guaranty Mortgage Corporation
c/o UCS	Via E-Flex
P.O. Box 751090	
Memphis, TN 38175	
US Trustee	
Region 13	
Via E-Flex	

on this 28th day of April 2023.

/s/ Bart Ziegenhorn
BART E. ZIEGENHORN #93140

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[ROA 2585]

GO11-2(b) / AE /3

IN THE UNITED STATES BANKRUPTCY COURT
EASTERN DISTRICT OF ARKANSAS
DELTA DIVISION

IN RE: THOMAS LEE SR. CASE NO: 19-16848
KEATHLEY Chapter 13

CHAPTER 13 ORDER TO PAY TRUSTEE
(DIRECT PAY)

The above named debtor has filed a petition under Chapter 13 of the United States Bankruptcy Code.

IT IS ORDERED that until further orders of this court, the debtor named above shall pay the sum of ***\$474.75 MONTHLY*** and each succeeding period thereafter to:

Mark T. McCarty, Trustee
3554 Momentum Place
Chicago, IL 60689-5335

IT IS FURTHER ORDERED, that all funds forwarded to the Trustee shall be by money order, cashiers check, or other payment form accepted by the Trustee and ***are due by the 22nd of each month unless scheduled otherwise.***

IT IS FURTHER ORDERED, that the payments required herein are to commence on January 01, 2020.

IT IS FURTHER ORDERED THAT this Order supersedes any previous order to the debtor to make payments to the Trustee in this case.

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Date: 12/30/2019 /s/ PHYLLIS M. JONES
Phyllis M. Jones, Bankruptcy
Judge

cc: THOMAS LEE SR. KEATHLEY
CONNIE IRENE KEATHLEY
Bart Ziegenhorn (Noticed by ECF)
MARK T. MCCARTY

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[ROA 2609-10]

IN THE UNITED STATES BANKRUPTCY COURT
EASTERN DISTRICT OF ARKANSAS

IN RE:	THOMAS LEE	CASE NO.
	KEATHLEY, SR.	2:19-bk-16848
	CONNIE IRENE	
	KEATHLEY	
	DEBTOR(s)	

**ORDER APPROVING WORKER'S
COMPENSATION SETTLEMENT**

Now on this day comes on before the Court the Amended Motion to Approve Worker's Compensation Settlement filed by debtors, Thomas Lee Keathley, Sr., and Connie Irene Keathley. Based upon the Amended Motion to Approve Worker's Compensation Settlement, Notice of Opportunity to Object, no filing of objections and other things and matters before the Court, the Court hereby orders:

1. The Debtor, Thomas Lee Keathley, Sr., was injured on the job and received a disability settlement in the amount of \$22,500.00. After deduction of fees and costs, Debtors net settlement was \$18,000.00.

2. Debtor's counsel failed to obtain approval of settlement from the Court. The Court hereby approves the settlement.

3. The Debtor's plan provides for 100% payment to all creditors. The Debtor is in compliance with the plan.

4. The Debtor has \$4,000 in proceeds from the settlement. The Debtor agrees that the remaining proceeds of \$4,000.00 shall be submitted to the

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Trustee for distribution within thirty (30) days from
this order.

IT IS SO ORDERED.

s/ Phyllis M. Jones
Phyllis M. Jones
United States Bankruptcy Judge
Dated: 05/24/2023

APPROVED BY:

/s/ Bart Ziegenhorn
BART ZIEGENHORN
Attorney for Debtors

s/ K. Emerson
MARK McCARTY
Trustee